

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 22, 2018
Secretary of State
CC2293267002

Entity Name: LEGEND LAKES HOMEOWNERS ASSOCIATION OF VERO BEACH, INC.

Current Principal Place of Business:

C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962

Current Mailing Address:

C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962 US

FEI Number: 04-3681299

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AR CHOICE MANAGEMENT, INC.
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAY MILLER

02/22/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name GAMBLE, JEROME
Address C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
City-State-Zip: VERO BEACH FL 32962

Title TREASURER
Name STEPHENSON, FRANK
Address C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
City-State-Zip: VERO BEACH FL 32962

Title PRESIDENT
Name CHISHOLM, KEVAN
Address C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
City-State-Zip: VERO BEACH FL 32962

Title VP
Name RHODES, BILL
Address C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
City-State-Zip: VERO BEACH FL 32962

Title VP
Name TAVLIN, STEVEN
Address C/O AR CHOICE MANAGEMENT
100 VISTA ROYALE BLVD
City-State-Zip: VERO BEACH FL 32962

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEVAN CHISHOLM

PRESIDENT

02/22/2018

Electronic Signature of Signing Officer/Director Detail

Date