2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004239

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 02/11/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **SECRETARY** Title **TREASURER**

SPATA, CAROLYN VAN DYKE, JEFF Name Name

Address C/O AR CHOICE MANAGEMENT Address C/O AR CHOICE MANAGEMENT

100 VISTA ROYALE BLVD 100 VISTA ROYALE BLVD

City-State-Zip: VERO BEACH FL 32962 City-State-Zip: VERO BEACH FL 32962

VΡ Title **PRESIDENT** Title

Name TORTORELLI, ROBERT Name VORNDRAN, JOHN

Address C/O AR CHOICE MANAGEMENT Address C/O AR CHOICE MANAGEMENT

100 VISTA ROYALE BLVD 100 VISTA ROYALE BLVD

VERO BEACH FL 32962 VERO BEACH FL 32962 City-State-Zip: City-State-Zip:

DIRECTOR Title

Name TAVLIN, STEVEN

Address 100 VISTA ROYALE BOULEVARD

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: ROBERT TORTORELLI

PRESIDENT

02/11/2019

FILED Feb 11, 2019

Secretary of State

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