## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007164

Entity Name: LEGENDS GOLF & COUNTRY CLUB MASTER ASSOCIATION,

INC.

FILED
Apr 12, 2018
Secretary of State
CC6649141027

## **Current Principal Place of Business:**

8600 LEGENDS BOULEVARD FORT MYERS, FL 33912

## **Current Mailing Address:**

8600 LEGENDS BOULEVARD FORT MYERS, FL 33912 US

FEI Number: 56-2461192 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HART, THOMAS BESQ. KNOTT CONSOER EBELINI HART & SWETT, P.A. 1625 HENDRY ST STE 301 FT. MYERS, FL 33901 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VF

Name WARREN, C DAVID Name HOFFMAN, WILLIAM
Address 14500 FARRINGTON WAY Address 8633 BRITTANIA DR

#106 City-State-Zip: FORT MYERS FL 33912

Title

DIRECTOR

City-State-Zip: FORT MYERS FL 33912

Title TREASURER

Name BRICK, JEFFREY
Name CUMMINGS, KATHLEEN

Address 14424 DEVINGTON WAY Address 8721 NOTTINGHAM POINTE WAY

City-State-Zip: FORT MYERS FL 33912

Title SECRETARY Title DIRECTOR

Name CARPENTER, ROBERT
Name THOMAS, JOHN

Address 14511 LEGENDS BLVD N

Address 8491 LANGSHIRE WAY #104

City-State-Zip: FORT MYERS FL 33912 City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR

Name KEEN, SUZANNE

Address 8356 SHORECREST DR

City-State-Zip: FORT MYERS FL 33912

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: C DAVID WARREN PRESIDENT 04/12/2018