PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS		FILED
				1 11.1.1.
				99 MAR 29 - AM II: 02
<b>DOCUMENT #</b> F97000005855 (8)				OCCUPATION AND A CONTACTOR
1. Corporation Name				SECA HAMILA GA STATE TALLAMASSAE, FLORIDA
Ì				THEOTHER WAS TROPINED.
LEGACY LAND DEVELOPMENT CORPORATION				
Principal Place	e of Business	Mailing Address		70,
5400 LEGACY DRIVE 5400 LEGACY			DRIVE	
PLANO, TX 75024 H1 4A 66			-004 210F	DO NOT WRITE IN THIS SPACE
		PLANO, TX 75	5024-3105	3. Date Incorporated or Qualified 11/04/1997
2. Principal	Place of Business	2a. Mailing Address	<del>-</del>	4. FEI Number Applied For
21		26		75-2671075 Not Applicable
Suite, Apt #, etc.		Suite, Apt #. etc		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23	-	28		Trust Fund Contribution Added to Fees
Zip	Country 25	Zip [3	Country	8. This corporation owes the current year Intangible Personal Property Tax. X Yes No
	9. Name and Address of Current			10. Name and Address of New Registered Agent
81 Name				
CORPORATION SERVICE COMPANY  82 Street Addres				ress (P.O. Box Number is Not Acceptable)
1201 HAYS STREET				
SUITE 105				
TALLAHASSEE, FLORIDA 32301  [84] City  FL   85  Zip Code				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE				
12.	Signature, typed or printed name of register OFFICERS AND D		(NOTE Registered A	Agent signature required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P/D	DELETE	13 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	WROTEN, JOHN W		1.2 NAME	30000283T263
STREET ADDRESS	5400 LEGACY DRIV	<b>V</b> E	1.3 STREET ADDRESS	-04/06/9901085004
CITY - ST - ZIP	PLANO, TX 75024		1.4 CITY - ST - ZIP	****150.00 ****150.0
TITLE NAME	V/D  BUSCH, DANIEL F	DELETE	21 TITLE 22 NAME	Change Additio
STREET ADDRESS	5400 LEGACY DRI	JE	23 STREET ADDRESS	
CITY - ST - ZIP	PLANO, TX 75024		24 CITY - ST - ZIP	
TITLE	S MADDIE CUIDIEV	DELETE	31 TITLE	Change Additio
NAME STREET ADDRESS	MARBLE, SHIRLEY  5400 LEGACY DRIV		32 NAME 33 STREET ADDRESS	
CITY - ST - ZIP	PLANO, TX 75024		34 CITY - ST - ZIP	
TITLE	T/D	DELETE	41 TITLE	Change Additio
NAME	KRENZ, SCOTT J	112	4.2 NAME	
STREET ADDRESS CITY - ST - ZIP	5400 LEGACY DRIV  PLANO, TX 75024	A E	4.3 STREET ADDRESS	
TITLE	AS	DELETE	51 TITLE	Change Additio
NAME	THOMAS, LISA V		52 NAME	C Dom Ac
STREET ADDRESS	5400 LEGACY DRIV	/E	53 STREET ADDRESS	
CITY - ST - ZIP	PLANO, TX 75024		54 CITY ST ZIP	
TITLE NAME	AT BARTON, BARBARA	DELETE	61 TITLE	Change Additio
STREET ADDRESS	l =	/E	62 NAME 63 STREET ADDRESS	
CITY - ST - ZIP	PLANO, TX 75024		64 CITY - ST - ZIP	
44 I horoby o	artification the information according with	h thin filing dans and qualifica		in Section 119.07(3)(i) Florida Statutes   Lurther certify that the

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. If urther certify that the information indicated on this annual report or supplemental annual report as true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE:

Daylime Phone #

STEEL 323845.4

STF FL32381F.1 Barbara Barion ASSI TREASURER