2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K95224

1. Entity Name
LEGEND PROPERTIES, INC.

Principal Place of Business	Mailing Address
2105 BRUCE ST LAKELAND, FL 33801	115 AMHERST ROAD CRANSTON, RI 02920 US

DO NOT WRITE IN THIS SPACE

02092005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2952980	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DAWLEY, JOAN
2128 BRUCE ST
LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____*Joan Dawley*_____   JOAN DAWLEY   PRESIDENT   2-17-05

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DAWLEY, JOAN
STREET ADDRESS	2128 BRUCE STREET
CITY-ST-ZIP	LAKELAND, FL 33801

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____*Joan Dawley*_____   JOAN DAWLEY   President   2-17-05   212-545-7146

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #