

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012740

FILED
Mar 30, 2009
Secretary of State

Entity Name: THE LEGENDS AT SJ, LLC

Current Principal Place of Business:

475 WEST TOWN PLACE
SAINT AUGUSTINE, FL 32092

New Principal Place of Business:

300 SOUTH LEGACY TRAIL
SAINT AUGUSTINE, FL 32092

Current Mailing Address:

335 CENTER AVENUE
MAMARONECK, NY 10543

New Mailing Address:

FEI Number: 59-3756306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLASP INC.
3001 TAMIAMI TRAIL NORTH 4TH FLOOR
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THE CROWLEY GROUP
Address: 4 RIVER AVE.
City-St-Zip: GREENWICH, CT 06830

Title: MGR () Delete
Name: PETRO AUGUSTINE, LLC
Address: 335 CENTER AVE
City-St-Zip: MAMARONECK, NY 10543

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL PETRILLO

MGR

03/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date