

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002510

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Entity Name:** LEGACY COMMUNITIES OF BERKSHIRE PLACE, LLC

**Current Principal Place of Business:**

1358 THOMASWOOD DRIVE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

101 NORTH MONROE STREET , SUITE 900  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

1358 THOMASWOOD DRIVE  
TALLAHASSEE, FL 32308

**New Mailing Address:**

101 NORTH MONROE STREET , SUITE 900  
TALLAHASSEE, FL 32301

**FEI Number:** 48-1294738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COOPER, CHARLES L JR  
3520 THOMASVILLE ROAD, SUITE 200  
TALLAHASSEE, FL 32309 US

**Name and Address of New Registered Agent:**

COOPER, CHARLES L JR  
101 NORTH MONROE STREET , SUITE 900  
TALLAHASSEE, FL 32301 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:

04/10/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LEGACY COMMUNITIES., LLC  
Address: 3520 THOMASVILLE RD., STE. 200  
City-St-Zip: TALLAHASSEE, FL 32309

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LEGACY COMMUNITIES., LLC  
Address: 101 NORTH MONROE STREET , SUITE 900  
City-St-Zip: TALLAHASSEE, FL 32301

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: CHASE BARKE

SEC

04/10/2008

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