2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000085753

1. Entity Name

LEGACY COMMUNITIES OF VINTAGE POINT, LLC



FILED Apr 04, 2006 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

Mailing Address

3520 THOMASVILLE ROAD, SUITE 200 TALLAHASSEE, FL 32309

3520 THOMASVILLE ROAD, SUITE 200 TALLAHASSEE, FL 32309



DO NOT WRITE IN THIS SPACE

02182008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1888240 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char flons of registered agent.	nging its registere	d office or registered agent, or both,	in the State of Flonda. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed figure of registered agent and title if applicable	(NCTF: Registered	Agent signature required when constituting	DATE
F	lling Fee is \$50.00 ue by May 1, 2006	(No. 2. No. 2. N	Special and the special and th	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEGACY COMMUNITIES, LLC 3520 THOMASVILLE ROAD, SUITE 200 TALLAHASSEE, FL 32309		00000491463 04/19/06-80023-010 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				΄ ο μετά οδυρούς ο οτο βρίτο
TITLE MAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE	
TITLE NAME STREET ADDRESS CRY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP				e de la companya de l
TITLE NAME				**

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited fiability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE