

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000004587

**FILED**  
**Mar 17, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA LEGEND REALTY,LLC.

**Current Principal Place of Business:**

16559 N. 91 PL.  
LOX., FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX. 32064  
P.B.G., FL 33420

**New Mailing Address:**

P.O.BOX. 292893  
DAVIE, FL 33329

**FEI Number:** 27-0752748

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEDINA, DAMARIS L  
16559 N. 91 PL.  
LOX., FL 33470 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:** PRE  
**Name:** MEDINA, DAMARIS L  
**Address:** 16559 N. 91 PL  
**City-St-Zip:** LOX., FL 33470

I hereby 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:** DAMARIS L MEDINA

PRE

03/17/2010

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