

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000744

FILED
Mar 16, 2010
Secretary of State

Entity Name: LEGACY PARK OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4631 WOODLAND CORP. BLVD.
SUITE 101
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4631 WOODLAND CORP. BLVD.
SUITE 101
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3686781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: PD
Name: JOHNSTON, JOSEPH E
Address: 4631 WOODLAND CORP. BLVD., SUITE 101
City-St-Zip: TAMPA, FL 33614

Title: D
Name: FENZA, ROBERT E
Address: 500 CHESTERFIELD PKWY.
City-St-Zip: MALVERN, PA 19355

Title: D
Name: SHEPPARD, ANNE E
Address: 500 CHESTERFIELD PKWY.
City-St-Zip: MALVERN, PA 19355

Title: VP
Name: ACKERMAN, LORI
Address: 4631 WOODLAND CORP. BLVD., SUITE 101
City-St-Zip: TAMPA, FL 33614

Title: ST
Name: BROWNE, KIM
Address: 4631 WOODLAND CORP. BLVD., SUITE 101
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE SHEPPARD

D

03/16/2010

Electronic Signature of Signing Officer or Director

Date