2002

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State
04-03-2002 90035 001 ****70.00

DOCUMENT # N00000001835

1. Entity Name

THE LEGACY CONDOMINIUM ASSOC., INC.

DO NOT WRITE IN THIS SPACE

B0058750

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2. Principal Place of Business	3. Mailing Address
3723 E. C-30A	3880 E. C-30A
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SEAGROVE BCH., FL.	City & State: SANTA ROSA BCH., FL.
Zip: 32459 Country: US	Zip: 32459 Country: US

4. FEI Number: 59-3649542 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: GARRETT REALTY SERV., INC.

Street Address (P.O. Box Number is Not Acceptable): 3723 E. C-30A

City: SEAGROVE BCH. FL Zip Code: 32459

8. 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 _____ 03/21/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	IGOU, DEVON
STREET ADDRESS	31 BIRMINGHAM ST.
CITY-ST-ZIP	SEAGROVE BCH., FL. 32459
TITLE	VPD
NAME	MEYERS, PATRICIA
STREET ADDRESS	66 RIVER WALK PLACE
CITY-ST-ZIP	MEMPHIS, TN. 38103
TITLE	STD
NAME	HARTLEY, GEORGE
STREET ADDRESS	5399 C-30A #105
CITY-ST-ZIP	SEAGROVE BCH., FL. 32459
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CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 03/21/02 850-231-1325