2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003486

FILED Apr 22, 2008 Secretary of State

Entity Name: LEGACY PARK MASTER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 107 N. LINE DR. APOPKA, FL 32703 US **Current Mailing Address: New Mailing Address:** 107 N. LINE DR APOPKA, FL 32703 US FEI Number: 76-0756032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SUTHERLAND, THERESA D 107 N. LINE DR. APOPKA, FL 32703 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DE CARLO, RONNIE SHINAR, PAUL Name: Name: 601 BRAYTON LAND Address: 13-14 TERLMINS TERRACE Address: City-St-Zip: DAVENPORT, FL 33897 US City-St-Zip: SOUTHAMPTON, UK SO143DT UK Title: VD () Delete Title: (X) Change () Addition CHOJNOWSKI, GARY Name: HAWKS, CANDICE Name: Address: 359 LANCASTER DR. Address: 11315 CORPORATE BLVE, SUITE 250 City-St-Zip: DEVENPORT, FL 33897 US City-St-Zip: ORLANDO, FL 32817 US Title: () Delete Title: () Change () Addition JENKINS, TARLA Name: Name: 114 WALTHAM COURT Address: Address: City-St-Zip: DAVENPORT, FL 33897 US City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition Name: BOORMAN, PETER Name: LAGROW, MATTHEW Address: 106 HAVENSHAM WAY Address: 235 KETTERING ROAD City-St-Zip: DAVENPORT, FL 33897 US City-St-Zip: DAVENPORT, FL 33897 US Title: () Delete Title: (X) Change () Addition EGRI, MATTHEW BOORMAN, PETER Name: Name: 235 KETTERING ROAD 106 HAVERSHAM WAY Address: Address: City-St-Zip: DAVENPORT, FL 33897 US City-St-Zip: DAVENPORT, FL 33897 US Title: () Delete Title: () Change (X) Addition DECARLO, RONNIE Name: Name: Address: Address: 601 BRAYTON LANE DAVENPORT, FL 33897 US City-St-Zip: City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: PAUL SHINAR PD 04/22/2008