

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008920

FILED  
Jul 05, 2006  
Secretary of State

**Entity Name:** LEGACY VILLAGE OFFICE PARK CONDOMINIUM OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

315 E. ROBINSON STREET, STE. 600  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

315 E. ROBINSON STREET, STE. 600  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

PRICE, SCOTT M.  
315 E. ROBINSON STREET, STE. 600  
ORLANDO, FL 32801 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:**

Title: DP ( ) Delete  
Name: TRAUGER, CARL  
Address: 315 E. ROBINSON STREET, STE. 600  
City-St-Zip: ORLANDO, FL 32801

Title: DV ( ) Delete  
Name: HUTTO, SHAW  
Address: 315 E. ROBINSON STREET, STE. 600  
City-St-Zip: ORLANDO, FL 32801

Title: DST ( ) Delete  
Name: HUTTO, SHANNON  
Address: 315 E. ROBINSON STREET, STE. 600  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL TRAUGER

DP

07/05/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date