

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000007208

FILED  
Nov 05, 2009  
Secretary of State

**Entity Name:** PBG LEGENDS COMMERCIAL PROPERTY OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

% NASON, YEAGER, GERSON, WHITE & LIOCE, PA  
1645 PALM BEACH LAKES BOULEVARD, #1200  
WEST PALM BEACH, FL 33401

## New Principal Place of Business:

C/O JAMES BROWN PA  
1110 N. OLIVE AVENUE  
WEST PALM BEACH, FL 33401

## Current Mailing Address:

% NASON, YEAGER, GERSON, WHITE & LIOCE, PA  
1645 PALM BEACH LAKES BOULEVARD, #1200  
WEST PALM BEACH, FL 33401

## New Mailing Address:

C/O JAMES BROWN PA  
1110 N. OLIVE AVENUE  
WEST PALM BEACH, FL 33401

**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:

ARMOUR, ALAN I ESQUIRE  
1645 PALM BEACH LAKES BOULEVARD  
SUITE 1200  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

BROWN, JAMES N ESQUIRE  
1110 N. OLIVE AVENUE  
WEST PALM BEACH, FL 33401 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: JAMES N. BROWN

11/05/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Change (X) Addition  
Name: BROWN, JAMES N  
Address: 1110 N. OLIVE AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Change (X) Addition  
Name: LEVY, ROB  
Address: 5801 CONGRESS AVENUE, STE 200  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Change (X) Addition  
Name: WEST, BRIAN  
Address: 3125 SW MAPP ROAD  
City-St-Zip: PALM CITY, FL 34990

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: JAMES N. BROWN

D

11/05/2009

Electronic Signature of Signing Officer or Director

Date