2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007895

FILED Jun 26, 2009 Secretary of State

Entity Name: THE LEGEND CLUB CHARITABLE FOUNDATION, INC.

Current F	Principal Place of Business:	New Principal	Place of Business:
	PLES BLVD FL 34109		
Current N	Nailing Address:	New Mailing A	ddress:
	PLES BLVD FL 34109		
In accordar	r: 26-3257482 FEI Number Applied For() FE nce with s. 607.193(2)(b), F.S., the corporation did not rece d Address of Current Registered Agent:	•	ress of New Registered Agent:
1395 PAN	LAWDOCK, INC. ITHER LANE SUITE 300 FL 34109 US		
	e named entity submits this statement for the purpo e of Florida.	se of changing its rec	gistered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PCC () Delete DEVITO, ANDREW 8889 PELICAN BAY BLVD STE 300 NAPLES, FL 34108	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPCC () Delete COLEMAN, MARK 5679 NAPLES BLVD NAPLES, FL 34109	Title: Name: Address: City-St-Zip:	() Change () Addition
Name: Address:	VPD () Delete TRETTER, ANDREW 5679 NAPLES BLVD NAPLES, FL 34109	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	TRETTER, ANDREW 5679 NAPLES BLVD	Name: Address:	()Change ()Addition ()Change ()Addition
Name: Address: City-St-Zip: Title: Name: Address:	TRETTER, ANDREW 5679 NAPLES BLVD NAPLES, FL 34109 VPD () Delete BEAMON, BOB PO BOX 802002	Name: Address: City-St-Zip: Title: Name: Address:	

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: MARK COLEMAN VPCC 06/26/2009