

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 29, 2011
Secretary of State

DOCUMENT# N21672

Entity Name: SEMINOLE LEGENDS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US**New Principal Place of Business:**2910 KERRY FOREST PARKWAY
SUITE D-4 # 294
TALLAHASSEE, FL 32309 US**Current Mailing Address:**PO BOX 13089
TALLAHASSEE, FL 32317 US**New Mailing Address:**2910 KERRY FOREST PARKWAY
SUITE D-4 # 294
TALLAHASSEE, FL 32309 US**FEI Number:** 59-2897335**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RHINEHART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US**Name and Address of New Registered Agent:**GARBARK, CHERI L
3096 WHIRLAWAY TRAIL
TALLAHASSEE, FL 32309 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: CHERI GARBARK

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT
Name: SMITH, TERRY
Address: 26 COLE PL
City-St-Zip: PALM COAST, FL 32137

Title: DP
Name: CRESCENTINI, BOB
Address: 16107 EAST BURREL DRIVE
City-St-Zip: LUTZ, FL 33549 US

Title: DS
Name: MCKAY, JAN
Address: 3429 LAKE SHORE DRIVE WEST
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: D
Name: SPURLIN, HIRAM J
Address: 2001 SETTING SUN TRAIL
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: DVP
Name: RIETHER, TOM
Address: 95 HOPEWELL DRIVE
City-St-Zip: OCOEE, FL 34761 US

Title: D
Name: HUEY, JOEL
Address: 1519 DRUID ROAD
City-St-Zip: MAITLAND, FL 32751 US

I hereby 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 all other like empowered.

SIGNATURE: CHERI GARBARK

RA

04/29/2011

Electronic Signature of Signing Officer or Director

Date