

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90035 005 ****61.25

DOCUMENT # N97000007164

1. Entity Name

LEGENDS GOLF & COUNTRY CLUB MASTER ASSOCIATION,

Principal Place of Business

**LEGENDS GOLF & COUNTRY CLUB
 8600 LEGENDS BLVD
 FORT MYERS FL 33912
 US**

Mailing Address

**LEGENDS GOLF & COUNTRY CLUB
 8600 LEGENDS BLVD
 FORT MYERS FL 33912
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0767283

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KTG&S REGISTERED AGENT CORPORATION
 NATIONS BANK TOWER
 100 SE 2ND STREET, SUITE 2800
 MIAMI FL 33131-2144**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
 NAME: GEARY, DENISE Delete
 STREET ADDRESS: 6450 NW 110 AVE
 CITY-ST-ZIP: MIAMI FL

TITLE: P/D
 NAME: John Debitetto Change Addition
 STREET ADDRESS: 13891 Jetport Loop
 CITY-ST-ZIP: Fort Myers, FL 33913

TITLE: STD
 NAME: MCCHESENEY, VALERIE Delete
 STREET ADDRESS: 13891 JETPORT LOOP, SUITES 9 & 10
 CITY-ST-ZIP: FORT MYERS FL 33913

TITLE: VP/D
 NAME: Kirk Knowles Change Addition
 STREET ADDRESS: 13891 Jetport Loop
 CITY-ST-ZIP: Fort Myers, FL 33913

TITLE: VD
 NAME: CIERPIK, JILL Delete
 STREET ADDRESS: 8190 ST ROAD 84
 CITY-ST-ZIP: DAVIE FL 33324

TITLE: SIT/D
 NAME: Tom Drumm Change Addition
 STREET ADDRESS: 13891 Jetport Loop
 CITY-ST-ZIP: Fort Myers, FL 33913

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature THOMAS DRUMM 3/27/01 (941) 561-6522

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)