2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 01, 2004 8:00 am Secretary of State DOCUMENT # N99000007660 1. Entity Name 04-01-2004 90003 004 ****61.25 LEGACY RESERVE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address ASSOCIATED PROPERTY MGMT. 1928 LAKE WORTH RD. ASSOCIATED PROPERTY MGMT. **54024037** 1928 LAKE WORTH RD LAKE WORTH FL 33461 LAKE WORTH FL 33461 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State 4. FEI Number Applied For 65-0977957 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ASSOCIATED PROPERTY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 1928 LAKE WORTH RD. LAKE WORTH FL 33461 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Due By May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. מפ TITLE Delete TITLE ☐ Addition LEVITT, DAVID G NAME NAME 7576 GREENVILLE CIRCLE STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP CITY-ST-7IP TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIMON, STEVEN NAME NAME 7504 GREENVILLE CIRCLE STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP CITY-ST-ZIP VD TITLE Delete TITLE Change ☐ Addition DAVIS, LAURIE ANN NAME NAME 7564 GREENVILLE CIRCLE STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP CITY-ST-ZIP PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition BEELER, STACEY NAME 7583 GREENVILLE CIRCLE STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-7IP CITY-ST-ZIP VI TITLE ☐ Change ☐ Delete TITLE Addition WEIN, SUSAN NAME NAME 7426 GREENVILLE CIRCLE STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467 CUTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

3/17/04 STOUEN S. SIMON, TREASUREN SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sther

with all

changed, or on an attachment with an add

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 trusteeler bowered of execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if