FILED
04 FEB 10 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMENDED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000092679

1. Entity Name
LEGEND CUSTOM BUILDERS, INC.

Principal Place of Business	Mailing Address
14 DEL PARDO BLVD NORTH #201 CAPE CORAL, FL 33909	14 DEL PARDO BLVD NORTH #201 CAPE CORAL, FL 33909

500002762198 5
02/09/04--01068--002 **88.75

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1044948 — Applied For / Not Applicable

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
SMART, GERALD 12734 KENWOOD LANE, #49 FORT MYERS, FL 33907	Name: Winer, Steven I Street Address (P.O. Box Number is Not Acceptable): 2320 First St Ste 1000 City: Ft Myers FL Zip Code: 33901

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: _____ 1/12/04
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PT ☒ Delete	TITLE	Davis, Charles ☒ Change ☐ Addition
NAME	ANDERSEN, SCOTT C	NAME	President
STREET ADDRESS	PO BOX 07388	STREET ADDRESS	3755 East 82nd St
CITY-ST-ZIP	FT. MYERS, FL 33919	CITY-ST-ZIP	Indianapolis, IN 46240
TITLE	VS ☐ Delete	TITLE	Senior Vice President & General Manager ☐ Change ☒ Addition
NAME	DAVIS, CHARLES	NAME	Lewis Roberts
STREET ADDRESS	3755 EAST 82ND ST.	STREET ADDRESS	13671 Park Crest Blvd. Apt 522
CITY-ST-ZIP	INDIANAPOLIS, IN 46240	CITY-ST-ZIP	Ft Myers, Fl 33912-4382
TITLE	SECT ☒ Delete	TITLE	Secretary ☐ Change ☒ Addition
NAME	DRIVER, LINDA C	NAME	Karen Coggins
STREET ADDRESS	1418 NE 11TH TERRACE	STREET ADDRESS	1217 SE 23rd Ave #
CITY-ST-ZIP	CAPE CORAL, FL 33909	CITY-ST-ZIP	Cape Coral, Fl 33990
TITLE	☐ Delete	TITLE	Asst. Secretary ☐ Change ☒ Addition
NAME		NAME	Dee Harding
STREET ADDRESS		STREET ADDRESS	6881 Princess Lane
CITY-ST-ZIP		CITY-ST-ZIP	Avon, IN 46123
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	500002762198 5
STREET ADDRESS		STREET ADDRESS	01/26/04--01093--001 **61.25
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/02)

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Charles R Davis — Charles R Davis — 1/5/04 — 239-261-6270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #