2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113771

Entity Name: LEGACY GOLF & COUNTRY CLUB, INC.

FILED Mar 23, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1020 LAKE SUMTER LANDING THE VILLAGES, FL 32162

Current Mailing Address: New Mailing Address:

1020 LAKE SUMTER LANDING THE VILLAGES, FL 32162

FEI Number: 59-3758572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROY, STEVEN M ESQ.

MCLIN & BURNSED P.A.

976 DEL MAR DRIVE

THE VILLAGES, FL 32159 US

ROY, STEVEN M ESQ.

MCLIN & BURNSED P.A.

1028 LAKE SUMTER LANDING

THE VILLAGES, FL 32162 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: 03/23/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MORSE, H. GARY
 Name:
 MORSE, H. GARY

 Address:
 1100 MAIN ST
 Address:
 1020 LAKE SUMTER LANDING

City-St-Zip: THE VILLAGES, FL 32159 City-St-Zip: THE VILLAGES, FL 32162

Title: S () Delete Title: S (X) Change () Addition Name: BURNSED, R. DEWEY Name: BURNSED, R. DEWEY

Address: 1100 MAIN ST Address: 1028 LAKE SUMTER LANDING City-St-Zip: THE VILLAGES, FL 32159 City-St-Zip: THE VILLAGES, FL 32162

Name: MORSE, MARK G Name: MORSE, MARK G

Address: 1100 MAIN ST Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32159 City-St-Zip: THE VILLAGES, FL 32162

Title: TD () Delete Title: TD (X) Change () Addition

Name: WISE, JOHN F Name: WISE, JOHN F

Address: 1100 MAIN ST Address: 1028 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32159 City-St-Zip: THE VILLAGES, FL 32162

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. GARY MORSE P 03/23/2005