

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000120313

1. Entity Name  
LEGEND YACHTS OF AMERICA, INC.



Principal Place of Business  
2851 CYPRESS CREEK RD.  
FORT LAUDERDALE, FL 33309

Mailing Address  
2851 CYPRESS CREEK RD.  
FORT LAUDERDALE, FL 33309



04172006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
04-3621623

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CAPPADONNA, RICHARD  
2851 CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309

**DO NOT WRITE  
IN THIS SPACE**

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME CAPPADONA, RICHARD R  
STREET ADDRESS 2851 CYPRESS CREEK RD.  
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

U00000540271  
05/10/06-80013-003 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard Cappadona 954  
Cappadona 4/26/06 9694420