

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90038 040 ***150.00

DOCUMENT # P03000122670
 1. Entity Name
LEGACY AT LELY RESORT, INC.




Principal Place of Business Mailing Address
 4770 ALBERTON CT STE 2602 4770 ALBERTON CT STE 2602
 NAPLES, FL 34105 NAPLES, FL 34105

2. Principal Place of Business 3. Mailing Address
2245 Venetian Court **2245 Venetian Court**

Suite, Apt. #, etc.
Building 4 Suite, Apt. #, etc.
Building 4

City & State City & State
Naples, FL **Naples, FL**

Zip Country Zip Country
34109 **USA** **34109** **USA**

50002511

 02212006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
20-0363140 Not Applicable

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

6. Name and Address of Current Registered Agent
BATEMAN, ARTHUR L
4770 ALBERTON COURT, #2602
NAPLES, FL 34105

7. Name and Address of New Registered Agent
 Name **Bateman, Arthur L.**
 Street Address (P.O. Box Number is Not Acceptable)
2245 Venetian Court
Building 4
 City **Naples** FL Zip Code **34109**

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: *Arthur L. Bateman* DATE: *3/9/06*
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME	D BATEMAN, ARTHUR L	<input type="checkbox"/> Delete
STREET ADDRESS	4770 ALBERTON CT STE 2602	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE NAME	D DERSCH, JOYCE E	<input type="checkbox"/> Delete
STREET ADDRESS	4770 ALBERTON CT STE 2602	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE NAME	D DULANEY, JO ANN	<input type="checkbox"/> Delete
STREET ADDRESS	4770 ALBERTON CT STE 2602	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2245 Venetian Court, Bldg 4	
CITY-ST-ZIP	Naples, FL 34109	
TITLE NAME		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2245 Venetian Court, Bldg 4	
CITY-ST-ZIP	Naples, FL 34109	
TITLE NAME		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2245 Venetian Court, Bldg 4	
CITY-ST-ZIP	Naples, FL 34109	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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: *Arthur L. Bateman* Date: *3/9/06* Daytime Phone #: *239 430 1012*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR