2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069019

City-St-Zip:

Entity Name: LEGENDS PROPERTY MANAGEMENT & SERVICES INC.

FILED Feb 08, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
7913 RAM MIRAMAR	ONA ST , FL 33023			2311 WILEY STREET HOLLYWOOD, FL 33020		
Current Mailing Address:			New Maili	New Mailing Address:		
7913 RAMONA ST MIRAMAR, FL 33023			SUITE #20	1041 HONEY CREEK RD SUITE #208 CONYERS, GA 30013		
FEI Number	:	FEI Number Applied For (X)	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	
WILLIAMS, CLEON B 7913 RAMONA ST MIRAMAR, FL 33023 US			2311 WILE	WILLIAMS, CLEON B 2311 WILEY STREET HOLLYWOOD, FL 33020 US		
	e named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	ts registered of	fice or registered agent, or both,	
SIGNATU	RE:			02/08/2007		
	Electroni	c Signature of Registered Age	nt		Date	
Election Car	mpaign Financing	Trust Fund Contribution (X).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	WILLIAMS, CLE 7913 RAMONA 3 MIRAMAR, FL 3 VT () WILLIAMS, PAT 7913 RAMONA 3 MIRAMAR, FL 3	ST 3023 Delete RICIA A ST	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	WILLIAMS, CLE 2311 WILEY ST HOLLYWOOD, I CFO (X) WILLIAMS, PAT 2311 WILEY ST HOLLYWOOD, I	REET FL 33020 Change () Addition RICIA A REET FL 33020 Change (X) Addition NATHAN A	
Address: City-St-Zip: Title: Name: Address:	()	Delete	Address: City-St-Zip: Title: Name: Address:	HOLLYWOOD,	FL 33020 Change (X) Addition IRLADEAN M	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

HOLLYWOOD, FL 33020

SIGNATURE: PATRICIA A WILLIAMS CFO 02/08/2007