2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15083

City-St-Zip:

Entity Name: LEGEND ADVISORY CORPORATION

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4600 E PARK DRIVE 4600 E PARK DRIVE SUITE 300 SUITE 300 WEST PALM BEACH, FL 33410 PALM BEACH GARDENS, FL 33410 **Current Mailing Address: New Mailing Address:** 3920 RCA BLVD #2004 PALM BEACH GARDENS, FL 33410 FEI Number: 13-2935555 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: SPINELLO, MARK J. 3920 RCA BLVD. **SUITE 2004** PALM BEACH GARDENS, FL 33410 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SPINELLO, MARK Name: Name: SPINELLO, MARK J 3920 RCA BLVD., STE 2004 3920 RCA BLVD., STE 2004 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410 VTD Title: Title: () Delete () Change () Addition Name: FERRIS GLENN T Name: 3920 RCA BLVD., STE 2004 Address: Address: PALM BEACH GARDENS, FL 33410 City-St-Zip: City-St-Zip: Title: Title: VS () Delete () Change () Addition CARLSON, DANIEL W Name: Name: 3920 RCA BLVD., STE 2004 Address: Address: PALM BEACH GARDENS, FL 33410 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MEHROTRA, SHASHI Name: Name: Address: 3920 RCA BLVD., STE 2004 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: CCO Title: () Delete () Change () Addition HALVOSA, JAMES J. Name: Name: 3920 RCA BLVD., SUITE 2004 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: (X) Change () Addition STROHM, MICHAEL D Name: Name: STROHM, MICHAEL D 6300 LAMAER AVE. Address: Address: 6300 LAMAR AVE.

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:

SHAWNEE MISSION, KS 66202

SIGNATURE: DANIEL W. CARLSON VS 04/17/2006

SHAWNEE MISSION, KS 66202