

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P21056 (7)

1. Corporation Name

LEGEND SERVICES CORPORATION



Principal Place of Business

3920 RCA BLVD.  
SUITE 2004  
PALM BEACH GARDENS FL 33410

Mailing Address

3920 RCA BLVD.  
SUITE 2004  
PALM BEACH GARDENS FL 33410

3. Date Incorporated or Qualified  
09/27/1988

3a. Date of Last Report  
03/30/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
65-0065739

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPINELLO, MARK J.  
3920 RCA BLVD.  
SUITE 2004  
PALM BEACH GARDENS FL 33410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME  
SPINELLO, MARK J  
STREET ADDRESS  
13367 WILLIAM MAYER COURT  
CITY-ST-ZIP  
PALM BEACH GARDENS FL

1.2 TITLE ☒ DELETE

NAME  
S  
COGNETTI, LAURA J  
STREET ADDRESS  
360 HAMMOCKS TRAIL  
CITY-ST-ZIP  
WEST PALM BEACH FL

1.3 TITLE ☒ DELETE

NAME  
T  
HOOD, SHARON P  
STREET ADDRESS  
8806 THOUSAND PINES COURT  
CITY-ST-ZIP  
WEST PALM BEACH FL

1.4 TITLE ☐ DELETE

NAME  
D  
RESTINO, PHILIP C.  
STREET ADDRESS  
22 ST JAMES DR  
CITY-ST-ZIP  
PALM BEACH GARDENS FL

1.5 TITLE ☒ DELETE

NAME  
P  
MCBAY, WALTER L  
STREET ADDRESS  
4 RIVER CHASE TERRACE  
CITY-ST-ZIP  
PALM BEACH GARDENS FL

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE S/D ☐ Change ☒ Addition

1.2 NAME  
Mark J. Spinello  
1.3 STREET ADDRESS  
13367 William Meyer Court  
1.4 CITY-ST-ZIP  
Palm Beach Gardens, FL 33410

2.1 TITLE V/T ☐ Change ☒ Addition

2.2 NAME  
Glenn T. Ferris  
2.3 STREET ADDRESS  
417 Woodview Circle  
2.4 CITY-ST-ZIP  
Palm Beach Gardens, FL 33418

3.1 TITLE P/D ☐ Change ☒ Addition

3.2 NAME  
Michael J. Provines  
3.3 STREET ADDRESS  
122 Windward Drive  
3.4 CITY-ST-ZIP  
Palm Beach Gardens, FL 33418

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenn T. Ferris

V/T

01-26-96 (407)694-0110

Date

Daytime Phone #

CR2E034 (12/95)