

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 8: 57

DOCUMENT # **P22951** (8)

1. Corporation Name
THE LEGEND GROUP, INC.

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
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/10/1989	3a. Date of Last Report 01/28/1994
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 65-0093256	Applied For Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 (Type or printed name of registered agent and title if applicable)

(If 211, Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RESTINO, PHILIP C	1.2 NAME	
STREET ADDRESS	22 ST. JAMES DRIVE	1.3 STREET ADDRESS	
CITY, ST, ZIP	PALM BEACH GARDENS FL	1.4 CITY, ST, ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPINELLO, MARK J.	2.2 NAME	
STREET ADDRESS	13367 WILLIAM MEYER COURT	2.3 STREET ADDRESS	
CITY, ST, ZIP	PALM BEACH FL	2.4 CITY, ST, ZIP	
TITLE	TD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIPPE, SCOTT H.	3.2 NAME	Delete
STREET ADDRESS	218 FAIRWAY WEST	3.3 STREET ADDRESS	
CITY, ST, ZIP	TEQUESTA FL	3.4 CITY, ST, ZIP	
TITLE	P	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUM, EDWARD J	4.2 NAME	Delete
STREET ADDRESS	6480 WOOD LAKE	4.3 STREET ADDRESS	
CITY, ST, ZIP	JUPITER FL	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	T
STREET ADDRESS		5.3 STREET ADDRESS	Sharon P. Hood
CITY, ST, ZIP		5.4 CITY, ST, ZIP	6606 Thousand Pines Court West Palm Beach, FL 33411
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	P
STREET ADDRESS		6.3 STREET ADDRESS	Walter L. McBay
CITY, ST, ZIP		6.4 CITY, ST, ZIP	4 River Chase Terrace Palm Beach Gardens, FL 33418

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 110.07(3)(b), 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 amendment with an address.

SIGNATURE:

Mark J. Spinello, S / D 3/24/95 (407) 694-0110

DO NOT WRITE OR PRINTED NAME OF DOMESTIC OFFICER OR DIRECTOR

Date

Signature (Print)