
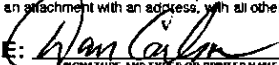


FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90174 038 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P22951					
1. Entity Name THE LEGEND GROUP, INC.					
Principal Place of Business 4600 EAST PARK DRIVE 300 PALM BEACH GARDENS, FL 33410			Mailing Address 3920 RCA BLVD. SUITE 2004 PALM BEACH GARDENS, FL 33410		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0093256	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPINELLO, MARK J. 3920 RCA BLVD. SUITE 2004 PALM BEACH GRDNS, FL 33410			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when removing)</small> DATE _____					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
FILE NOW!!! FEE IS \$165.00 <small>After May 1, 2003 Fee will be \$50.00. Make Check Payable to Florida Department of State</small>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VTD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FERRIS, GLENN T		NAME		
STREET ADDRESS	3920 RCA BOULEVARD, SUITE #2004		STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BUTCH, THOMAS W		NAME		
STREET ADDRESS	6300 LAMAR AVENUE		STREET ADDRESS		
CITY-ST-ZIP	SHAWNEE MISSION, KS 66202		CITY-ST-ZIP		
TITLE	SV	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CARLSON, DANIEL W		NAME		
STREET ADDRESS	3920 RCA BOULEVARD, SUITE #2004		STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SPINELLO, MARK J		NAME		
STREET ADDRESS	3920 RCA BOULEVARD, SUITE #2004		STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 officer 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: 		Daniel W. Carlson		4/17/03 561-694-0110	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

11009763



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (1/02)

The Legend Group

Advisory Services Corporation

Legend Advisory Corporation, a registered investment advisor.

Securities offered through Legend Equities Corporation, Member NASD and SIPC

ATTACHMENT

P22951

11009763

April 17, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: The Legend Group, Inc.

Dear Sir or Madam:

Enclosed please find the following documentation to support the Uniform Business Report for The Legend Group, Inc. in the state of Florida:

- Check in the amount of \$150.00 made payable to Florida Department of State
- 2003 Uniform Business Report

If you have any questions or need further documentation please contact me at 561-694-0110 ext. 126.

Sincerely,

Carla Nugent

Carla Nugent
Compliance Administrator