CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 27 AM 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078198 (6)

1. Corporation Name

LEGACY GOLF ADVISORY GROUP, INC.

Principal Place of Business	Mailing Address
4400 PGA BLVD. SUITE 302 PALM BEACH FL 33410	4400 PGA BLVD. SUITE 302 PALM BEACH FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/25/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 14515 Halter Rd	26 14515 Halter Rd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 West Palm Beach, Fl.	City & State 28 West Palm Beach FL
Zip 24 33414 / Country 25 Palm Beach	Zip 29 33414 / Country 30 Palm Beach

4. FEI Number: 65-0541937 ☐ 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. The 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
WILLIS, DOUGLAS 4400 PGA BLVD. SUITE 302 PALM BEACH 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 ______ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	BRALEY, STEVE	1.2 NAME	Steve Braley
STREET ADDRESS	14515 HALTER RD.	1.3 STREET ADDRESS	14515 Halter Rd
CITY, ST, ZIP	WEST PALM BEACH FL 33414	1.4 CITY, ST, ZIP	West Palm Beach, Fl. 33414
TITLE	D	2.1 TITLE	S/D ☐ Change ☐ Addition
NAME	BRALEY, MERRILEE	2.2 NAME	Merrilee Braley
STREET ADDRESS	14515 HALTER RD.	2.3 STREET ADDRESS	14515 Halter Rd.
CITY, ST, ZIP	WEST PALM BEACH FL 33414	2.4 CITY, ST, ZIP	West Palm Beach Fl. 33414
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	BRALEY, SPENCER	3.2 NAME	
STREET ADDRESS	14515 HALTER RD.	3.3 STREET ADDRESS	omit
CITY, ST, ZIP	WEST PALM BEACH FL 33414	3.4 CITY, ST, ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	BRALEY, GANT	4.2 NAME	omit
STREET ADDRESS	14515 HALTER RD.	4.3 STREET ADDRESS	
CITY, ST, ZIP	WEST PALM BEACH FL 33414	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		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 the 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] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4-22-95 Daytime Phone #: 407-795-9581

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