

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000082184 (8)
 1. Corporation Name
LEGENDARY STORAGE, INC.

Principal Place of Business 385 HIGHWAY 98 STE 60 DESTIN FL 32541	Mailing Address 385 HIGHWAY 98 STE 60 DESTIN FL 32541
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/30/1996	
21	Suite, Apt. #, etc	26	Suite, Apt. #, etc	4. FEI Number 59-3403869	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LEGLER, MITCHELL W ONE INDEPENDENT DRIVE STE 3104 JACKSONVILLE FL 32202				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ (NOIL Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	D/P
NAME	BOS, PETER H	1.2 NAME	BOS, PETER H.
STREET ADDRESS	385 HIGHWAY 98 STE 60	1.3 STREET ADDRESS	385 HWY 98E, STE 60
CITY-ST-ZIP	DESTIN FL	1.4 CITY-ST-ZIP	DESTIN, FL 32541
TITLE	VS	2.1 TITLE	T/V
NAME	CLAUSON, GREG	2.2 NAME	CLAUSON, GREG
STREET ADDRESS	385 HWY 98 E, 60	2.3 STREET ADDRESS	385 HWY 98E, STE 60
CITY-ST-ZIP	DESTIN FL	2.4 CITY-ST-ZIP	DESTIN, FL 32541
TITLE	V	3.1 TITLE	
NAME	LORENZEN, DWIGHT	3.2 NAME	
STREET ADDRESS	385 HWY 98E, 60	3.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	
NAME	PARKER, WENDY	4.2 NAME	
STREET ADDRESS	385 HWY 98 E, 60	4.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	S
NAME		5.2 NAME	BURKE, GAIL
STREET ADDRESS		5.3 STREET ADDRESS	385 HWY 98E, STE 60
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DESTIN, FL 32541
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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:  **Peter H. Bos** 4/1/98 (850) 654-6500

CR2E034 (10/97)