2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# P98000003081

Entity Name: LEGACY PROPERTIES, INC.

Current Principal Place of Business:

2400 GRAND HARBOR DR.
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

2400 GRAND HARBOR DR.
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 59-3495010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, KAREN T
2408 GRAND HARBOR DR.
PANAMA CITY BEACH, FL 32408

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MATHERS, JANICE B
Address: 4505 MAINSAIL DR.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: BROWN, C. DOUGLAS JR.
Address: 4508 MAINSAIL DR.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: BROWN, KAREN T
Address: 2408 GRAND HARBOR DR.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: BROWN, C. DOUGLAS SR.
Address: 237 PINE RIDGE DR.
City-St-Zip: PANAMA CITY, FL 32405

Title: S ( ) Delete
Name: BROWN, HONORINE D
Address: 2400 GRAND HARBOR DRIVE
City-St-Zip: PANAMA CITY, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. DOUGLAS BROWN, SR. D 01/07/2004

Electronic Signature of Signing Officer or Director — Date