2000 UNIFORM BUSINESS REPORT (UBR)

13. I hereby certify that the information supplied with the

changed, or on an attachme

SIGNATURE:

indicated on this report or supplemental report is of the corporation or the receiver or trustee empty

all other like

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED DOCUMENT # P99000101742 May 04, 2000 8:00 am Secretary of State LEGENDARY OFFICE BUILDING, INC. 05-04-2000 90134 030 ***150.00 Mailing Address Principal Place of Business 385 HWY 98 EAST STE 60 385 HWY 98 EAST STE 60 DESTIN FL 32541 DESTIN FL 32541 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3611529 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEGLER, MITHELL W Street Address (P.O. Box Number is Not Acceptable) 300A WHARFSIDE WAY JACKSONVILLE FL 32207 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition ☐ Delete TITLE D/P TITLE BOS, PETER H BOS. PETER H NAME NAME STREET ADDRESS 385 HWY 98 EAST STE 60 STREET ADDRESS 385 HWY 98E, STE 60 CITY-ST-ZIP CITY-ST-ZIP DESTIN FL 32541 DESTIN, FL 32541 ☐ Change X Addition ☐ Delete TITLE TITLE BUSFIELD, DAVID A NAME NAME STREET ADDRESS STREET ADDRESS 385 HWY 98E, STE 60 CITY-ST-ZIP CITY-ST-ZIP DESTIN, FL 32541 X Addition ☐ Change Delete TITLE TITLE NAME LEGLER, MITCHELL W NAME STREET ADDRESS STREET ADORESS 385 HWY 98E, STE 60 CITY-ST-ZIP CITY-ST-ZIP DESTIN, FL 32541 ☐ Change X Addition TITLE ☐ Delete TITLE NAME PARKER, WENDY STREET ADDRESS STREET ADDRESS 385 HWY 98E, STE 60 CITY-ST-ZIP CITY-ST-ZIP DESTIN, FL 32541 ☐ Change ☐ Delete TITLE Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

Daytime Phone #

filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

surve and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director owered to execute the feport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if