2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000101742

City-St-Zip:

DESTIN, FL 32541 US

Entity Name: LEGENDARY OFFICE BUILDING, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4460 LEGENDARY DR. 4100 LEGENDARY DR. STE. 400 STE. 200 DESTIN, FL 32541 DESTIN, FL 32541 **Current Mailing Address: New Mailing Address:** 4100 LEGENDARY DR. STE. 200 DESTIN, FL 32541 US FEI Number: 59-3611529 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEGLER, MITCHELL W 300A WHARFSIDE WAY US JACKSONVILLE, FL 32207 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D/P () Delete Title: (X) Change () Addition BOS, PETER H JR Name: BOS, PETER H JR Name: 4100 LEGENDARY DRIVE, SUITE 200 4100 LEGENDARY DRIVE, SUITE 200 Address: Address: City-St-Zip: DESTIN, FL 32541 US City-St-Zip: DESTIN, FL 32541 US Title: V/T Title: () Delete (X) Change () Addition BUSFIELD, DAVID A Name: Name: SAWYER, HUGH 4100 LEGENDARY DRIVE, SUITE 200 4100 LEGENDARY DRIVE, SUITE 200 Address: Address: DESTIN, FL 32541 US DESTIN, FL 32541 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PARKER, WENDY Name: Name: 4100 LEGENDARY DRIVE, SUITE 200 Address: Address: City-St-Zip: DESTIN, FL 32541 US City-St-Zip: Title: (X) Delete Title: () Change () Addition STOUT, JIM Name: Name: Address: 4100 LEGENDARY DR., STE 200 Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: WENDY PARKER S 04/30/2008