

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000109578

1. Entity Name

LEGENDS OF LADY LAKE, INC.

**FILED**  
**Mar 27, 2000 8:00 am**  
**Secretary of State**

03-27-2000 90131 007 \*\*\*158.75

Principal Place of Business

Mailing Address

5557 GRIVE MANOR  
LADY LAKE FL 32159

5557 GRIVE MANOR  
LADY LAKE FL 32159

2. Principal Place of Business

10841 US HWY 441 S.E.

3. Mailing Address

984 BICHARA BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BELLEVIEW FL

City & State

LADY LAKE, FL

4. FEI Number

59-3610047

Applied For

Not Applicable

Zip

34420

Country

USA

Zip

32159

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JONES, EDWARD G  
5557 GRIVE MANOR  
LADY LAKE FL 32159

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5557 GROVE MANOR

City

LADY LAKE FL

FL

Zip Code

32159

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)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME D  
STREET ADDRESS JONES, EDWARD G  
CITY-ST-ZIP 5557 GRIVE MANOR  
LADY LAKE FL 32159

TITLE ☐ Delete  
NAME D  
STREET ADDRESS JONES, CAROLYN M  
CITY-ST-ZIP 5557 GRIVE MANOR  
LADY LAKE FL 32159

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 5557 GROVE MANOR  
CITY-ST-ZIP LADY LAKE FL 32159

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 5557 GROVE MANOR  
CITY-ST-ZIP LADY LAKE FL 32159

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward G. Jones*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward G. Jones

3/16/00

352 750 6448

Date

Daytime Phone #

CR2E034 (9/99)