

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V20528

1. Entity Name
LEGENDARY DEVELOPMENT CORPORATION

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90084 009 ***150.00

Principal Place of Business
**385 HIGHWAY 98 EAST
SUITE 60
DESTIN FL 32541**

Mailing Address
**385 HIGHWAY 98 EAST
SUITE 60
DESTIN FL 32541**

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4460 Legendary Dr.

Suite, Apt. #, etc.
Ste. 400

City & State
Destin, FL

Zip
32541

Country
USA

3. Mailing Address
4460 Legendary Dr.

Suite, Apt. #, etc.
Ste. 400

City & State
Destin, FL

Zip
32541

Country
USA

4. FEI Number **59-3110945**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MITCHELL W LEGLER
300A WARFSIDE WAY
JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
300A WHARFSIDE WAY

City **Jacksonville** **FL** Zip Code **32207**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	DP BOS, PETER 385 HWY 98 E, STE 60 DESTIN FL 32541	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS LEGLER, MITCHELL W 385 HWY 98 E, STE 60 DESTIN FL 32541	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PARKER, WENDY 385 HIGHWAY 98 EAST DESTIN FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BUSFIELD, DAVID 385 HWY 98 E, STE 60 DESTIN FL 32541	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BOS, PETER H 4460 LEGENDARY DRIVE, SUITE 400 DESTIN, FL 32541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PARKER, WENDY 4460 LEGENDARY DRIVE, SUITE 400 DESTIN, FL 32541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BUSFIELD, DAVID 4460 LEGENDARY DRIVE, SUITE 400 DESTIN, FL 32541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter H. Bos

4/25/01

Date

850-337-8000

Daytime Phone #

CR2E034 (10/00)