

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000001060

**Entity Name:** LEGACY OAKS ON GILMORE LAKE OWNERS' ASSOCIATION, INC.

**FILED**  
**Mar 21, 2017**  
**Secretary of State**  
**CC9973977853**

**Current Principal Place of Business:**

657 EAST ROMANA ST.  
PENSACOLA, FL 32502

**Current Mailing Address:**

P. O. BOX 12507  
PENSACOLA, FL 32591 US

**FEI Number: 20-8347694**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PROFESSIONAL ASSOCIATION MANAGERS, LLC  
657 EAST ROMANA ST.  
PENSACOLA, FL 32502 US

*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: SUSAN L. MOODY**

**03/21/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            HENDERSON, DEMETRA  
Address        795 LAKE RIDGE LANE  
City-State-Zip: PENSACOLA FL 35214

Title            DIRECTOR, TREASURER,  
                     SECRETARY  
Name            SKELTON, JOYCE L  
Address        P. O. BOX 12507  
City-State-Zip: PENSACOLA FL 32591

Title            DIRECTOR, VP  
Name            MURPHY, BETTY  
Address        932 LEGACY OAKS DRIVE  
City-State-Zip: PENSACOLA FL 32514

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DEMETRA HENDERSON**

**PRESIDENT**

**03/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date