

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019668

FILED
Apr 29, 2008
Secretary of State

Entity Name: ELM LEGACY GROUP, LLC

Current Principal Place of Business:

2316 BARRY DRIVE SOUTH
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

2316 BARRY DRIVE SOUTH
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 20-8575864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLECKLEY BROWN, GWENDOLYN
2316 BARRY DRIVE SOUTH
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KLECKLEY BROWN, GWENDOLYN
Address: 2316 BARRY DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGRM () Delete
Name: MITCHELL HARPER, LINDA
Address: 1615 BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32206

Title: MGRM () Delete
Name: MITCHELL, AARON
Address: 2414 WEST LOURDES DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGRM () Delete
Name: BROWN, JOANN
Address: 9539 CARBONDALE DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGRM () Delete
Name: ROBERTS, SHIRLEY
Address: 7920 ORLANDO AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGRM () Delete
Name: WHEELER, JACK
Address: 8310 N.W. 10TH AVENUE
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KOHN, IRENE
Address: 2022 CONGRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LINDA MITCHELL HARPER

MGRM

04/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date