#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006769

Entity Name: LEGACY INSTITUTE FOR NATURE & CULTURE, INC.

FILED
Apr 21, 2015
Secretary of State
CC5275916213

## **Current Principal Place of Business:**

520 EAST DAVIS BLVD TAMPA, FL 33606

# **Current Mailing Address:**

P. O. BOX 1802 TAMPA. FL 33601

FEI Number: 20-1822793 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

WARD, R. CARLTON JR. 520 EAST DAVIS BLVD. TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

 Title
 DIRECTOR
 Title
 PRESIDENT

 Name
 WARD, R. CARLTON JR.
 Name
 BOMSTEIN, JOSH

 Address
 PO BOX 1802
 Address
 PO BOX 1802

City-State-Zip: TAMPA FL 33601 City-State-Zip: TAMPA FL 33601

Title **TREASURER** Title DIRECTOR Name MARTIN, BERT DIMMITT, MALLORY Name Address P. O. BOX 1802 Address PO BOX 1802 TAMPA FL 33601 City-State-Zip: City-State-Zip: TAMPA FL 33601

Title VP

Name DAVIS REYHER, KIMBERLY

Address P. O. BOX 1802 City-State-Zip: TAMPA FL 33601

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: MALLORY DIMMITT

Electronic Signature of Signing Officer/Director Detail

**DIRECTOR** 

04/21/2015