

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000073489

**FILED  
Jan 31, 2022  
Secretary of State  
7363961212CC**

**Entity Name:** LEGACY TRUST COMPANY

**Current Principal Place of Business:**

4200 MARSH LANDING BOULEVARD  
SUITE 100  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

4200 MARSH LANDING BOULEVARD  
SUITE 100  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 41-2027993

**Certificate of Status Desired:** No

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

MCLAUHLAN, KRISTIN D  
4200 MARSH LANDING BOULEVARD  
SUITE 100  
JACKSONVILLE BEACH, FL 32250 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 D  
Name MCLAUHLAN, RODNEY A  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DCC  
Name MCLAUHLAN, KRISTIN D  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR  
Name UHLAND, KRISTI B  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR  
Name QUICK, KRISTI M  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR  
Name WAY, KATHERINE D  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR  
Name EVANS, LEE MAURICE  
Address 4200 MARSH LANDING BOULEVARD  
SUITE 100  
City-State-Zip: JACKSONVILLE BEACH FL 32250

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

**SIGNATURE:** KRISTI M QUICK

**CHIEF ADMINISTRATIVE OFFICER** 01/31/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date