## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073489

**Entity Name: LEGACY TRUST COMPANY** 

**Current Principal Place of Business:** 

822 N HWY A1A NORTH

SUITE 101

PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:** 

822 N HWY A1A NORTH

SUITE 101

PONTE VEDRA BEACH, FL 32082

FEI Number: 41-2027993 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCLAUCHLAN, KRISTIN D 822 N HWY A1A NORTH SUITE 101

SOLIE IOI

PONTE VEDRA BEACH, FL 32082 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

FILED Mar 28, 2018

**Secretary of State** 

CC6195674673

Officer/Director Detail:

Title D Title D

Name MCLAUCHLAN, RODNEY A Name EVANS, DAVID FJR

Address 822 A1A NORTH STE 101 Address 822 A1A NORTH STE 101

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DCC Title DIRECTOR

Name MCLAUCHLAN, KRISTIN D Name UHLAND, KRISTI B

Address 822 A1A NORTH STE 101 Address 822 N HWY A1A NORTH

SUITE 101

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name QUICK, KRISTI M

Address 822 N HWY A1A NORTH

SUITE 101 Address 822 N HWY A1A NORTH

SUITE 101

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

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.