

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000074229

Entity Name: LEGACY M & C INC.**Current Principal Place of Business:**4423 RAFFIA PALM CIRCLE
NAPLES, FL 34119**Current Mailing Address:**4423 RAFFIA PALM CIRCLE
NAPLES, FL 34119 US**FEI Number:** 82-2746246**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOYT, MICHAEL R
4423 RAFFIA PALM CIRCLE
NAPLES, FL 34119 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	P
Name	HOYT, MICHAEL R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

Title	VP
Name	HOYT, CARLA R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

Title	SEC
Name	HOYT, CARLA R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

Title	TREA
Name	HOYT, MICHAEL R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

Title	DIRE
Name	HOYT, MICHAEL R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

Title	DIRE
Name	HOYT, CARLA R
Address	4423 RAFFIA PALM CIRCLE
City-State-Zip:	NAPLES FL 34119

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: MICHAEL R. HOYT**PRESIDENT****02/04/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date