

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000162828

**Entity Name:** WILKINSON LEGACY, LLC

**Current Principal Place of Business:**

106 COMMERCE ST.  
STE. 110  
LAKE MARY, FL 32746

**Current Mailing Address:**

106 COMMERCE ST.  
STE. 110  
LAKE MARY, FL 32746 US

**FEI Number:** 46-4308417

**Certificate of Status Desired:** No

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

WILKINSON, RICHARD W  
106 COMMERCE ST.  
STE. 110  
LAKE MARY, FL 32746 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

**Authorized Person(s) Detail :**

Title MNGMBR  
Name WILKINSON, RICHARD W  
Address 106 COMMERCE ST., STE. 110  
City-State-Zip: LAKE MARY FL 32746

Title MGR  
Name WILKINSON, LINDA J  
Address 106 COMMERCE ST., STE. 110  
City-State-Zip: LAKE MARY FL 32746

Title MANAGER  
Name WILKINSON, JAMES BLAKE  
Address 106 COMMERCE ST.  
STE. 110  
City-State-Zip: LAKE MARY FL 32746

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LINDA J WILKINSON

**MANAGER**

**02/01/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date