

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000175465

**Entity Name:** LEGACY COACH WORKS LLC

**Current Principal Place of Business:**

511 NORTH BRADFORD AVENUE  
TAMPA, FL 33609

**Current Mailing Address:**

511 NORTH BRADFORD AVENUE  
TAMPA, FL 33609

**FEI Number:** 47-2298452

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22ND 4TH FLOOR  
MIAMI, FL 33145 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 OMGR  
Name RAMIREZ-STONE, LILIAN  
Address 511 NORTH BRADFORD AVENUE  
City-State-Zip: TAMPA FL 33609

Title OMGR  
Name EDUARTE, ALICIA M  
Address 511 NORTH BRADFORD AVENUE  
City-State-Zip: TAMPA FL 33609

*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:** ALICIA EDUARTE

**MANAGER**

**05/01/2015**

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

\_\_\_\_\_  
Date