

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004200

FILED  
Mar 20, 2008  
Secretary of State

Entity Name: CULTURAL LEGACY, INCORPORATED

**Current Principal Place of Business:**

6733 IDLEWILD ST  
FORT MYERS, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

6733 IDLEWILD ST  
FORT MYERS, FL 33966

**New Mailing Address:**

FEI Number: 95-3094677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ARIAS, MARIA ELENA  
6733 IDLEWILD STREET  
FORT MYERS, FL 33966 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: ARIAS, RAMON  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

Title: VCVP ( ) Delete  
Name: ARIAS, MARIA ELENA  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

Title: ST ( ) Delete  
Name: ARIAS, MARIA ELENA  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CP (X) Change ( ) Addition  
Name: ARIAS, RAMON PRES  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

Title: VCVP (X) Change ( ) Addition  
Name: ARIAS, MARIA ELENA V.PRES  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

Title: ST (X) Change ( ) Addition  
Name: ARIAS, MARIA ELENA SEC.TRE  
Address: 6733 IDLEWILD STREET  
City-St-Zip: FORT MYERS, FL 33966

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA ELENA ARIAS

VP

03/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date