

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000292

Entity Name: LEGACY PRODUCTIONS, INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

540 MENDOCINO AVENUE  
SANTA ROSA, CA 954015213

## New Principal Place of Business:

330 CLEMATIS STREET #117  
WEST PALM BEACH, FL 33401

## Current Mailing Address:

540 MENDOCINO AVENUE  
SANTA ROSA, CA 954015213

## New Mailing Address:

122 CALISTOGA RD #324  
SANTA ROSA, CA 95409

FEI Number: 20-2118005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.  
1333 N. DUVAL STREET  
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: SCHWARTZ, LAWRENCE A  
Address: 1821 HAPPY VALLEY ROAD  
City-St-Zip: SANTA ROSA, CA 95409

Title: VP ( ) Delete  
Name: HUTCHINSON, KEITH D  
Address: 26889 TOYON LANE  
City-St-Zip: CLOVERDALE, CA 95425

Title: S ( ) Delete  
Name: SCHWARTZ, MADELINE  
Address: 1821 HAPPY VALLEY ROAD  
City-St-Zip: SANTA ROSA, CA 95409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: SCHWARTZ, LAWRENCE A  
Address: 835 BISCAYNE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP (X) Change ( ) Addition  
Name: SCHWARTZ, MADELINE  
Address: 834 UPLAND ROAD  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T (X) Change ( ) Addition  
Name: SCHWARTZ, LAWRENCE A  
Address: 835 BISCAYNE  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE A SCHWARTZ

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date