



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000006575 1. Entity Name LEGG INC. DETENTION OF FLORIDA			
Principal Place of Business 4361 TECHNOLOGY DRIVE STE D LIVERMORE, CA 94551		Mailing Address 4361 TECHNOLOGY DRIVE STE D LIVERMORE, CA 94551	
			
		02072007 No Chg-P CR2E034 (11/05)	
4. FEI Number 77-0451835		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE STE 4 WESTON, FL 33331			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	DPS	U00000664959 03/23/07-80004-020 150.00	
NAME	LEGG, ROBERT P		
STREET ADDRESS	4361 TECHNOLOGY DRIVE STE D		
CITY-ST-ZIP	LIVERMORE, CA 94551		
TITLE	DVT		
NAME	D'ORAZIO, LEONARD A		
STREET ADDRESS	308 RUTHERFORD DR		
CITY-ST-ZIP	DANVILLE, CA 94526		
TITLE	CFO		
NAME	D'ORAZIO, LEONARD A		
STREET ADDRESS	308 RUTHERFORD DR		
CITY-ST-ZIP	DANVILLE, CA 94526		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE <i>Leonard A. D'Orazio</i> LEONARD A. D'Orazio		3-9-07 925-605-4544	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	