## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000003215

Entity Name: LEGACY TEXAS INSURANCE SERVICES INC

FILED May 12, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Principal Place of Business:			
	APAHO RD SU SON, TX 7508					
Current Mailing Address:			New Mailing Address:			
PO BOX 8 RICHARD	51018 SON, TX 7508	851018				
FEI Number: 75-2244792		FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	l Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
	OHN D KSHIRE LANE SPRINGS, FL					
	e named entity s e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU	RE:					
	Electror	nic Signature of Registered Age	nt		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VELTING, RICH	O RD SUITE 200	Title: Name: Address: City-St-Zip:	FREDETTE, P	HO RD SUITE 200	
Title: Name: Address: City-St-Zip:	O ( ) LEGACY TEXA 5000 LEGACY PLANO, TX 75	DRIVE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	ST () CHOWDHURY, 4306 DUCK PO ROWLETT, TX	ND LANE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) DYER, PHILLIF 2629 ROTHLAN PLANO, TX 75	ND	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VCD ( ) FISK, GEORGE 6152 CHAMBE FRISCO, TX 79	RLYN DRIVE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL FREDETTE PRES 05/12/2009