


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90130 038 ****50.00

DOCUMENT # L03000019484	
1. Entity Name LEGACY SERVICES OF SOUTH FLORIDA, LLC	

Principal Place of Business 1928 TYLER STREET HOLLYWOOD, FL 33020	Mailing Address 1928 TYLER STREET HOLLYWOOD, FL 33020
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2. Principal Place of Business - No P.O. Box # 3837 Hollywood Blvd.	3. Mailing Address 3837 Hollywood Blvd.
Suite, Apt. #, etc. Ste. B	Suite, Apt. #, etc. Ste. B

City & State Hollywood, FL.	City & State Hollywood, FL.
Zip 33021	Zip 33021
Country Broward	Country Broward

6. Name and Address of Current Registered Agent FONTENOT, RANDY 1928 TYLER STREET HOLLYWOOD, FL 33020	
7. Name and Address of New Registered Agent Name Fontenot, Randy Street Address (P.O. Box Number is Not Acceptable) 3837 Hollywood Blvd. City Hollywood, FL Zip Code 33021	

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 <i>Randy Fontenot</i>	Randy Fontenot	DATE 1-9-07

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FONTENOT, RANDY 1928 TYLER STREET HOLLYWOOD, FL 33020 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Randy Fontenot 3837 Hollywood Blvd. Ste. B Hollywood, FL. 33021 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. 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 is true and accurate and that my 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 608, Florida Statutes.	
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SIGNATURE <i>Randy Fontenot</i>	Randy Fontenot	DATE 1-9-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		