

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011595

Entity Name: LEGACY VENTURES IX, LLC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

P. O. BOX 10103
TAMPA, FL 33679

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 10103
TAMPA, FL 33679

New Mailing Address:

FEI Number: 20-2275405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LITSCHGI, VALERIE ESQ.
601 BAYSHORE BLVD.
SUITE 700
TAMPA, FL 33606 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RINKER, CHRIS
Address: P. O. BOX 10846
City-St-Zip: TAMPA, FL 33679

Title: MGR () Delete
Name: LITSCHGI, A. B JR.
Address: P. O. BOX 10103
City-St-Zip: TAMPA, FL 33679

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic 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.

SIGNATURE: A. B. LITSCHGI, JR.

MGR

03/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date