

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057445

Entity Name: LEGALEEZ, L.L.C.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

1008 RUBY STREET
LAKELAND, FL 33815

New Principal Place of Business:

Current Mailing Address:

1008 RUBY STREET
LAKELAND, FL 33815

New Mailing Address:

FEI Number: 01-0837559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, JOSEPH M
1701 JIM REDMAN PKWY
PLANT CITY, FL 33563 US

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: MGRM () Delete
Name: HEADRICK, SALLY
Address: 1008 RUBY STREET
City-St-Zip: LAKELAND, FL 33815

Title: MGRM () Delete
Name: HEADRICK, FORREST
Address: 1008 RUBY STREET
City-St-Zip: LAKELAND, FL 33815

Title: MGRM () Delete
Name: HARLAND, HEATHER
Address: 5115 NORTH SOCRUM LOOP ROAD # 225
City-St-Zip: LAKELAND, FL 33805

ADDITIONS/CHANGES:

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

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: SALLY HEADRICK

MGRM

05/01/2007

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