

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079920

Entity Name: LEGACY GROUP LLC

FILED
Jan 04, 2006
Secretary of State

Current Principal Place of Business:

15001 OAKLAND AVE
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

15001 OAKLAND AVE
WINTER GARDEN, FL 34787 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER, JOSHUA
15001 OAKLAND AVE
WINTER GARDEN, FL 34787 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: FOWLER, DEBORAH A
Address: 15001 OAKLAND AVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGR () Delete
Name: BRADY, GARY
Address: PO BOX 784332
City-St-Zip: WINTER GARDEN, FL 34778 US

Title: MGR () Delete
Name: FOWLER, CHARLES A JR.
Address: 213 ZACHARY WADE DR
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: DAVID, ALDERMAN
Address: PO BOX 783332
City-St-Zip: WINTER GARDEN, FL 34778 US

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

Title: MGR () Change (X) Addition
Name: FOWLER, JOSHUA
Address: 15001 OAKLAND AVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR () Change (X) Addition
Name: MILLER, CHARM
Address: 3784 FALLSCREST CIR
City-St-Zip: CLERMONT, FL 34711

Title: MGR () Change (X) Addition
Name: MILLER, BRIAN
Address: 3784 FALLSCREST CIR
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSHUA FOWLER

MGR

01/04/2006

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