

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095243

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: MANAGEMENT GROUP FOR LEGACY, LLC

**Current Principal Place of Business:**

5550 BATES STREET  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

11125 PARK BOULEVARD, SUITE 104-103  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 11-3760640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

HESHELOW, KATHY  
11125 PARK BLVD  
SUITE 104-103  
SEMINOLE, FL 33772 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: KATHY HESHELOW

01/16/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HESHELOW, KATHY  
Address: 5550 BATES STREET  
City-St-Zip: SEMINOLE, FL 33772

Title: MGR ( ) Delete  
Name: HESHELOW, HARLAN  
Address: 5550 BATES STREET  
City-St-Zip: SEMINOLE, FL 33772

Title: S ( ) Delete  
Name: HESHELOW, HARLAN  
Address: 5550 BATES STREET  
City-St-Zip: SEMINOLE, FL 33772

Title: T ( ) Delete  
Name: HESHELOW, KATHY  
Address: 5550 BATES STREET  
City-St-Zip: SEMINOLE, FL 33772

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HESHELOW, KATHY  
Address: 11125 PARK BLVD, SUITE 104-103  
City-St-Zip: SEMINOLE, FL 33772

Title: MGR (X) Change ( ) Addition  
Name: HESHELOW, HARLAN  
Address: 11125 PARK BLVD, SUITE 104-103  
City-St-Zip: SEMINOLE, FL 33772

Title: S (X) Change ( ) Addition  
Name: HESHELOW, HARLAN  
Address: 11125 PARK BLVD, SUITE 104-103  
City-St-Zip: SEMINOLE, FL 33772

Title: T (X) Change ( ) Addition  
Name: HESHELOW, KATHY  
Address: 11125 PARK BLVD, SUITE 104-103  
City-St-Zip: SEMINOLE, FL 33772

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: KATHY HESHELOW

MGR

01/16/2006

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