

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013625

Entity Name: LEGACY ASSETS, L.L.C.

FILED  
Mar 28, 2009  
Secretary of State

**Current Principal Place of Business:**

16569 SE 77 NORTHRIDGE COURT  
LAKE LAKE, FL 32162

**New Principal Place of Business:**

**Current Mailing Address:**

16569 SE 77 NORTHRIDGE COURT  
LAKE LAKE, FL 32162

**New Mailing Address:**

FEI Number: 20-8392529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

QUINN, LESLIE ESQ.  
16910 S US HWY 441, STE 205  
SUMMERFIELD, FL 34491 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: MGRM ( ) Delete  
Name: HAMMOND, LUTHER H  
Address: 16569 SE 77 NORTHRIDGE COURT  
City-St-Zip: LAKE LAKE, FL 32162

**ADDITIONS/CHANGES:**

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: LUTHER HAMMOND

MR.

03/28/2009

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