

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067078

Entity Name: GN LEGACY, LLC

FILED  
Mar 05, 2009  
Secretary of State

## Current Principal Place of Business:

35095 U.S. HWY 19 NORTH, STE 100  
PALM HARBOR, FL 34684

## New Principal Place of Business:

35111 US HWY 19 N  
SUITE 207  
PALM HARBOR, FL 34684

## Current Mailing Address:

35095 U.S. HWY 19 NORTH, STE 100  
PALM HARBOR, FL 34684

## New Mailing Address:

35111 US HWY 19 N  
SUITE 207  
PALM HARBOR, FL 34684

FEI Number: 26-3144803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UBALDINI, GARY  
35095 U.S. HWY 19 NORTH, STE 100  
PALM HARBOR, FL 34684 US

## Name and Address of New Registered Agent:

UBALDINI, GARY  
35111 US HWY 19 N  
SUITE 207  
PALM HARBOR, FL 34684 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:

03/05/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

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

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

## ADDITIONS/CHANGES:

Title: P ( ) Change (X) Addition  
Name: UBALDINI, GARY P  
Address: 866 POINT SEASIDE DR  
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: VP ( ) Change (X) Addition  
Name: UBALDINI, NICOLA VP  
Address: 866 POINT SEASIDE DR  
City-St-Zip: CRYSTAL BEACH, FL 34681

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: GARY UBALDINI

P

03/05/2009

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