

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000074861

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

FILED  
Apr 20, 2009  
Secretary of State

**Current Principal Place of Business:**

461 WATERFORD CICLE EAST  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

461 WATERFORD CICLE EAST  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

FEI Number: 26-3060477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOHNSON, PATRICIA G  
461 WATERFORD CICLE EAST  
TARPON SPRINGS, FL 34688 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

**ADDITIONS/CHANGES:**

Title: D ( ) Change (X) Addition  
Name: JOHNSON, JOHNNY JR  
Address: 461 WATERFORD CIRCLE E  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D ( ) Change (X) Addition  
Name: JOHNSON, PATRICIA G  
Address: 461 WATERFORD CIRCLE E  
City-St-Zip: TARPON SPRINGS, FL 34688

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: PATRICIA G JOHNSON

D

04/20/2009

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