


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # M02000001051 1. Entity Name STEWARDSHIP LEGACY COACHING, LLC	
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Principal Place of Business 885 SEDALIA STREET SUITE 102 OCFEE, FL 34761	Mailing Address 11014 LAKE MINNEOLA SHORES CLERMONT, FL 34711
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04232007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 76-0710727	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, JEFF
 11014 LAKE MINNEOLA SHORES
 CLERMONT, FL 34711

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROGERS, JEFF P 11014 LAKE MINNEOLA SHORES CLERMONT, FL 34711
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Jeff Rogers* Date: 4-23-07 Daytime Phone #: 407-470-1405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE