

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004774

FILED
Jun 23, 2009
Secretary of State

Entity Name: THE LEGACY III, INC.

Current Principal Place of Business:

300 BAY DRIVE SOUTH
BRADENTON BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

PO BOX 333
BRADENTON BEACH, FL 34217

New Mailing Address:

FEI Number: 65-1044958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SMITH, EMILY A
300 BAY DR SOUTH
BRADENTON BEACH, FL 34217 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, EMILY A
Address: 300 BAY DRIVE SOUTH
City-St-Zip: BRADENTON BEACH, FL 34217

Title: VD () Delete
Name: CHAPPIE, JOHN R
Address: 108A 12TH ST SOUTH
City-St-Zip: BRADENTON BEACH, FL 34217

Title: TSD () Delete
Name: BESSONETTE, LEA ANN
Address: 300 BAY DRIVE SOUTH
City-St-Zip: BRADENTON BEACH, FL 34217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMILY ANNE SMITH

PD

06/23/2009

Electronic Signature of Signing Officer or Director

Date