

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003594

FILED  
Apr 11, 2006  
Secretary of State

**Entity Name:** LEGACY OF HOPE INTERNATIONAL, INC.

**Current Principal Place of Business:**

1069 ISLAND WAY  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 490147  
LEESBURG, FL 34749

**New Mailing Address:**

**FEI Number:** 55-0850360

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, S. TIMOTHY  
1069 ISLAND WAY  
LEESBURG, FL 34748 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

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: BROWN, S. TIMOTHY  
Address: 1069 ISLAND WAY  
City-St-Zip: LEESBURG, FL 34748

Title: VP ( ) Delete  
Name: BROWN, LAKHINA L  
Address: 1069 ISLAND WAY  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: BROWN, STEVE  
Address: 236 RODBOROUGH ROAD  
City-St-Zip: COLUMBIA, SC 29212

Title: D (X) Delete  
Name: MAHAN, TERA  
Address: 2900 PECAN AVE.  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: ANDERSON, JON  
Address: 1069 ISLAND WAY  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: THOMAS, WESLEY  
Address: 1069 ISLAND WAY  
City-St-Zip: LEESBURG, FL 34748

**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:

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 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: WESLEY O. THOMAS

D

04/11/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date