2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003594

Apr 28, 2009 Secretary of State

Entity Name: LEGACY OF HOPE INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: 806 PALM HARBOR COURT 36039 MEADOW BREEZE LANE LEESBURG, FL 34748 LEESBURG, FL 34748 **Current Mailing Address: New Mailing Address:** P.O. BOX 490147 LEESBURG, FL 34749 FEI Number: 55-0850360 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, S. TIMOTHY 26039 MÉADOW BREEZE LANE LEESBURG, FL 34748 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PST () Delete () Change () Addition BROWN, S. TIMOTHY Name: Name: 26039 MEADOW BREEZE LANE Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition Name: THOMAS, WESLEY Name: BROWN, STEVEN R Address: 2110 ARMOUR WAY Address: 236 RODBOROUGH ROAD City-St-Zip: LEESBURG, FL 34748 City-St-Zip: COLUMBIA, SC 29212 Title: () Delete Title: (X) Change () Addition BROWN, STEVE CARPENTER, AMELIA B Name: Name: 236 RODBOROUGH ROAD 311 WESTLAWN ROAD Address: Address: City-St-Zip: COLUMBIA, SC 29212 City-St-Zip: COLUMBIA, SC 29210 Title: (X) Delete Title: () Change () Addition Name: CATHCART, JANE Name: 806 PALM HARBOR COURT Address: Address: City-St-Zip: LEESBURG, FL 34748 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: S. TIMOTHY BROWN PST 04/28/2009