

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012411

FILED
Mar 25, 2007
Secretary of State

Entity Name: LEGACY INITIATIVES, INC.

Current Principal Place of Business:

90 NE 101 ST
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

90 NE 101 ST
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 20-4807231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLOMAN, CECILIA E
90 NE 101 ST
MIAMI SHORES, FL 33138 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: DP () Delete
Name: HOLLOMAN, CECILIA E
Address: 90 NE 101 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: DT () Delete
Name: SAWYER, NORMA J
Address: 325 JULIA ST
City-St-Zip: KEY WEST, FL 33040

Title: DS () Delete
Name: MCDONALD, YVONNE
Address: 1579 GRAND AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. (X) Change () Addition
Name: HOLLOMAN, CECILIA E
Address: 90 NE 101 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: MRS. (X) Change () Addition
Name: SAWYER, NORMA J
Address: 325 JULIA ST
City-St-Zip: KEY WEST, FL 33040

Title: MS. (X) Change () Addition
Name: MCDONALD, YVONNE
Address: 1579 GRAND AVENUE
City-St-Zip: MIAMI, FL 33133

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: CECILIA E. HOLLOMAN

MRS

03/25/2007

Electronic Signature of Signing Officer or Director

Date