## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000007660

Entity Name: LEGACY BUILDER INSTITUTE, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8238 WESTMINSTER ABBEY BLVD. 3214 BAYFLOWER AVE.. ORLANDO, FL 32835 HARMONY, FL 34773

Current Mailing Address: New Mailing Address:

8238 WESTMINSTER ABBEY BLVD. 3214 BAYFLOWER AVE... ORLANDO, FL 32835 HARMONY, FL 34773

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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:

FARNSWORTH, SCOTT M.

8238 WESTMINSTER ABBEY BLVD.

ORLANDO, FL 32835 US

FARNSWORTH, SCOTT M.

3214 BAYFLOWER AVE.

HARMONY, FL 34773 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: SCOTT M. FARNSWORTH 04/22/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: FARNSWORTH, SCOTT M. Name: FARNSWORTH, SCOTT M. Address: 8238 WESTMINSTER ABBEY BLVD. Address: 3214 BAYFLOWER AVE.

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: HARMONY, FL 34773

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: FARNSWORTH, MARCIE PARNSWORTH, MARCIE

Address: 8238 WESTMINSTER ABBEY BLVD. Address: 3214 BAYFLOWER AVE.
City-St-Zip: ORLANDO, FL 32835 City-St-Zip: HARMONY, FL 34773

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GREENWAY, SHARON
 Name:

 Address:
 7903 HORSE FERRY RD.
 Address:

 City-St-Zip:
 ORLANDO, FL 32835
 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: SCOTT M. FARNSWORTH PRES 04/22/2009

Electronic Signature of Signing Officer or Director

Date