2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010439

Entity Name: LEGACY ATHLETIC CLUB INC

FILED Apr 20, 2009 Secretary of State

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

201 BENNETT ST 143 ATLANTIC DRIVE WINTER SPRINGS, FL 32708 143 ATLAND, FL 32751

Current Mailing Address: New Mailing Address:

201 BENNETT ST 143 ATLANTIC DRIVE WINTER SPRINGS, FL 32708 MAITLAND, FL 32751

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

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

GARDNER, REBECCA C
201 BENNETT ST
WINTER SPRINGS, FL 32708 US
HUAMAN, SUSANA L
664 BROOKFIELD LOOP
LAKE MARY, FL 32746 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: SUSANA L. HUAMAN 04/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition Name: GARDNER, REBECCA C Name: HUAMAN, SUSANA L Address: 201 BENNETT ST Address: 664 BROOKFIELD LOOP

 Address:
 201 BENNETT ST
 Address:
 664 BROOKFIELD LOOP

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 LAKE MARY, FL 32746

Title: () Delete Title: (X) Change () Addition HUAMAN, SUSANA L Name: OSMAN, KEN T Name: Address: 664 BROOKFIELD LOOP Address: 1710 PALM AVENUE City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: WINTER PARK, FL 32789

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 OSNOS, SANDRA J
 Name:
 SLAVKIN, RACHEL

 Address:
 200 SPARTAN DR
 Address:
 684 RIVERCREST LANE

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 LONGWOOD, FL 32779

Title: TRES () Delete Title: TRES (X) Change () Addition

Name: OSMAN, KENNETH T TRES Name: MARSDEN, DIANA H
Address: 802 RUNNER OAK ST Address: 617 PRAIRIE LAKE DRIVE
City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: FERN PARK, FL 32730

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: SUSANA L. HUAMAN PRES 04/20/2009