

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003605

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** LEGACY OF INTEGRITY INC.

**Current Principal Place of Business:**

715 MAGNOLIA ST.  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

715 MAGNOLIA ST.  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MURDOCK, KAREN  
939 BOLTON RD.  
NEW SMYRNA BEACH, FL 32168 US

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

PORTER, KAREN E  
939 BOLTON RD.  
NEW SMYRNA BEACH, FL 32168 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: KAREN E. PORTER

01/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: PORTER, SHANE  
Address: 939 BOLTON RD.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VPT  
Name: MURDOCK, KAREN  
Address: 939 BOLTON RD.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby 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 all other like empowered.

SIGNATURE: KAREN E. MURDOCK

VPT

01/18/2010

Electronic Signature of Signing Officer or Director

Date