

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000005376

**FILED**  
**Jun 13, 2012**  
**Secretary of State**

**Entity Name:** LEGACY SPORTS ACADEMY, INC.

**Current Principal Place of Business:**

4117 SW 20TH STREET #222  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 141656  
GAINESVILLE, FL 326141656

**New Mailing Address:**

**FEI Number:** 26-4227033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENJAMIN, BASIL  
4117 SW 20TH STREET #222  
GAINESVILLE, FL 32607 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:** D  
**Name:** BENJAMIN, BASIL  
**Address:** 4117 SW 20TH STREET #222  
**City-St-Zip:** GAINESVILLE, FL 32607

**Title:** D  
**Name:** CHUNG, NATALIE  
**Address:** 813 SW 115TH STREET  
**City-St-Zip:** GAINESVILLE, FL 32607

**Title:** D  
**Name:** GIBBS, MICAELA  
**Address:** 10317 SW 30TH LANE  
**City-St-Zip:** GAINESVILLE, FL 32607

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:** BASIL BENJAMIN

DOC

06/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date