2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000065228

Entity Name: LEGACY INSURANCE GROUP INCORPORATED

FILED Feb 12, 2004 Secretary of State

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

5200 NEWBERRY RD 140 NW 75TH DRIVE

SUITE C D-5C

GAINESVILLE, FL 32607 GAINESVILLE, FL 32607

Current Mailing Address: New Mailing Address:

5200 NEWBERRY RD 140 NW 74TH DRIVE

D-5C SUITE C GAINESVILLE, FL 32607

GAINESVILLE, FL 32607

FEI Number: 59-3729506 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DELAPARTE, ADOLPH J DELAPARTE, ADOLPH J 140 NW 75TH DRIVE 5532 N.W. 43RD STREET GAINESVILLE, FL 32653 SUITE C

GAINESVILLE, FL 32607

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: 02/12/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DELAPARTE, ADOLPH J DELAPARTE, ADOLPH J Name: Name: 5200 NEWBERRY RD STE D-5C Address: 140 NW 75TH DRIVE, SUITE C Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADOLPH J. DELAPARTE 02/12/2004 D