## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000118809

DELAND, FL 32720

City-St-Zip:

Entity Name: NU-LEGYNDS, INC.

FILED Jul 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 528 MATHIS STREET DELAND, FL 32720 **Current Mailing Address: New Mailing Address:** P.O. BOX 273461 BOCA RATON, FL 334273461 FEI Number: 30-0027421 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: STINSON, ANNIE P 528 MATHIS STREET DELAND, FL 32720 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition STINSON, ANNIE P Name: Name: **528 MATHIS STREET** Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: Title: () Delete Title: () Change () Addition Name: STINSON, EDWARD J Name: **528 MATHIS STREET** Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD J STINSON CEO 07/26/2006