

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115463

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** LEGACY DEVELOPMENT OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

5805 SAUFLEY FIELD RD  
PENSACOLA, FL 32526

**New Principal Place of Business:**

**Current Mailing Address:**

5805 SAUFLEY FIELD RD  
PENSACOLA, FL 32526

**New Mailing Address:**

FEI Number: 20-3325871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOORHEAD, STEPHEN R  
25 W GOVERNMENT ST  
PENSACOLA, FL 32502 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: STAFFORD, E. TODD  
Address: 5805 SAUFLEY FIELD RD  
City-St-Zip: PENSACOLA, FL 32526

Title: DST  
Name: HEATON, CHARLES W  
Address: 5805 SAUFLEY FIELD RD  
City-St-Zip: PENSACOLA, FL 32526

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES W. HEATON

S/T

03/18/2010

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

\_\_\_\_\_ Date