

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128450

Entity Name: LEGACY UNLIMITED, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

704 BRUNNELL PARKWAY
LAKELAND, FL 33815

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 550
LAKELAND, FL 33802

New Mailing Address:

FEI Number: 20-3790150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIDLER, WALTER K JR.
704 BRUNNELL PARKWAY
LAKELAND, FL 33815 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: PCEO () Delete
Name: LAIDLER, WALTER K JR
Address: 704 BRUNNELL PKWY
City-St-Zip: LAKELAND, FL 33815 US

Title: V/D () Delete
Name: WALKER, PHILLIP E
Address: 5705 LAKE LUTHER ROAD
City-St-Zip: LAKELAND, FL 33805 US

Title: D () Delete
Name: WALLACE, LILLIE M
Address: 545 LAKE HARRIS DRIVE
City-St-Zip: LAKELAND, FL 33813 US

Title: D () Delete
Name: WALKER, CAPPIE
Address: 5705 LAKE LUTHER ROAD
City-St-Zip: LAKELAND, FL 33805 US

Title: S/D () Delete
Name: BODDIE, CHERYL
Address: 1571 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33809 US

Title: D () Delete
Name: JOHNSON, NOVELLA A
Address: 7983 INDIAN HEIGHTS DRIVE
City-St-Zip: LAKELAND, FL 33815 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WALTER K. LAIDLER, JR.

PCEO

04/30/2009

Electronic Signature of Signing Officer or Director

Date