

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153894

Entity Name: LEGACY SCAPES, INC.

FILED  
Jan 24, 2008  
Secretary of State

**Current Principal Place of Business:**

7836 CHERRY LAKE ROAD  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

7836 CHERRY LAKE ROAD  
GROVELAND, FL 34736

**New Mailing Address:**

FEI Number: 20-3823490

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALLIN, MICHEL  
7836 CHERRY LAKE ROAD  
GROVELAND, FL 34736 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: VP ( ) Delete  
Name: SALLIN, MICHEL  
Address: 7836 CHERRY LAKE ROAD  
City-St-Zip: GROVELAND, FL 34736

Title: P ( ) Delete  
Name: RESSLER, DAVID  
Address: 7836 CHERRY LAKE ROAD  
City-St-Zip: GROVELAND, FL 34736

Title: T ( ) Delete  
Name: RESSLER, MELANIE S  
Address: 7836 CHERRY LAKE ROAD  
City-St-Zip: FLORIDA, FL 34736

Title: VP ( ) Delete  
Name: SHERMAN, TYSON  
Address: 7836 CHERRY LAKE ROAD  
City-St-Zip: GROVELAND, FL 34736

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: ( ) Change ( ) Addition  
Name:  
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: TYSON SHERMAN

VP

01/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date