

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000061619

**Entity Name:** LEGENDARY VENTURES, INC.

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

715 MINNESOTA AVE  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

**Current Mailing Address:**

715 MINNESOTA AVE  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:** 26-0244507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROCHER, BRAD  
715 MINNESOTA AVE.  
LYNN HAVEN, FL 32444 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROCHER, BRAD  
Address: 715 MINNESOTA AVE.  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP  
Name: ROCHER, CRYSTAL  
Address: 715 MINNESOTA AVE.  
City-St-Zip: LYNN HAVEN, FL 32444

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: BRAD W ROCHER

P

04/23/2012

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

\_\_\_\_\_  
Date