

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000029716

FILED
Apr 27, 2009
Secretary of State

Entity Name: SOUTHERN LEGACY HOLDINGS, INC.

Current Principal Place of Business:

ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
SANTIAGO CHILE 7550198, XX

New Principal Place of Business:

851 HARBOR DR.
KEY BISCAVE, FL 33149 US

Current Mailing Address:

ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
SANTIAGO CHILE 7550198, XX

New Mailing Address:

ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
SANTIAGO CHILE, CL 7550198 CL

FEI Number: 98-0583159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHTON, LENORA
1403 HIDDEN OAKS BEND
ST CLOUD, FL 33149 US

Name and Address of New Registered Agent:

ASHTON, LENORA
1403 HIDDEN OAKS BEND
ST CLOUD, FL 334771 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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: ASHTON, STEPHANIE
Address: ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
City-St-Zip: SANTIAGO CHILE 7550198, XX

Title: DVS () Delete
Name: LOPEZ, CESAR A
Address: ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
City-St-Zip: SANTIAGO CHILE 7550198, XX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: ASHTON, STEPHANIE
Address: ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
City-St-Zip: SANTIAGO CHILE, CL 7550198 XX

Title: DVS (X) Change () Addition
Name: LOPEZ, CESAR A
Address: ENRIQUE FOSTER SUR 20 PISO 19 LAS CONDES
City-St-Zip: SANTIAGO CHILE, CL 7550198 XX

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: STEPHANIE ASHTON

DPT

04/27/2009

Electronic Signature of Signing Officer or Director

Date