

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075021

FILED  
Jan 06, 2012  
Secretary of State

Entity Name: LEGACY OF N.W. FL, INC.

**Current Principal Place of Business:**

308 SOUTH JEFFERSON STREET  
PENSACOLA, FL 32502

**New Principal Place of Business:**

801 E. CERVANTES ST.  
PENSACOLA, FL 32501

**Current Mailing Address:**

308 SOUTH JEFFERSON STREET  
PENSACOLA, FL 32502

**New Mailing Address:**

801 E. CERVANTES ST.  
PENSACOLA, FL 32501

FEI Number: 26-3155918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTHEWS, EDESEL F  
308 SOUTH JEFFERSON STREET  
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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MENKE, LORI T  
Address: 325 JAMES RIVER RD  
City-St-Zip: GULF BREEZE, FL 32561

Title: VD  
Name: RICHARDSON, ROBERT W  
Address: 801 E CERVANTES ST  
City-St-Zip: PENSACOLA, FL 32501

Title: STD  
Name: MENKE, WILLIAM J  
Address: 325 JAMES RIVER RD  
City-St-Zip: GULF BREEZE, FL 32561

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: LORI T. MENKE

PD

01/06/2012

Electronic Signature of Signing Officer or Director

Date