

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000041390

Entity Name: LEGAB, INC.

FILED
Feb 14, 2008
Secretary of State

Current Principal Place of Business:

2320 APALACHEE PKWY
STE E
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4089
TALLAHASSEE, FL 32315

New Mailing Address:

P.O. BOX 13493
TALLAHASSEE, FL 32317

FEI Number: 59-3574038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOUT, JOHN M
2998 GOLDEN EAGLE DR
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

STOUT, JOHN M
2998 GOLDEN EAGLE DR E
TALLAHASSEE, FL 32312 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:

02/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STOUT, JOHN M
Address: 2998 GOLDEN EAGLE DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Delete
Name: KOPELMAN, JACK L
Address: 13639 TWIN LAKE LANE
City-St-Zip: TAMPA, FL 336188421

Title: D (X) Delete
Name: KOPELMAN, WILLIAM M
Address: 13901 MIDDLE PARK DRIVE
City-St-Zip: TAMPA, FL 33624

Title: D (X) Delete
Name: KOPELMAN, BETTY S
Address: 13639 TWIN LAKE LANE
City-St-Zip: TAMPA, FL 336188421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STOUT, JOHN M
Address: 2998 GOLDEN EAGLE DR E
City-St-Zip: TALLAHASSEE, FL 32312

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: JOHN M. STOUT

D

02/14/2008

Electronic Signature of Signing Officer or Director

Date