

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005376

Entity Name: LEGACY SPORTS ACADEMY, INC.

Current Principal Place of Business:

4117 SW 20TH STREET #222
GAINESVILLE, FL 32607

Current Mailing Address:

POST OFFICE BOX 141656
GAINESVILLE, FL 32614-1656

FEI Number: 26-4227033

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENJAMIN, BASIL
4117 SW 20TH STREET #222
GAINESVILLE, FL 32607 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name BENJAMIN, BASIL
Address 4117 SW 20TH STREET #222
City-State-Zip: GAINESVILLE FL 32607

Title D
Name CHUNG, NATALIE
Address 813 SW 115TH STREET
City-State-Zip: GAINESVILLE FL 32607

Title D
Name FEASTERS, CHRISTINE
Address 8480 NW 20TH ST.
City-State-Zip: MCINTOSH FL 32664

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BASIL BENJAMIN

DIRECTOR

04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date