	inny Address.			
P.O. BOX 56	-			
SEVILLE, F	L 32190 US			
FEI Number: 82-5261567			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:			Certificate of Status Des	Silea. No
	Address of Current Registered Agent.			
MCNAUGHTON 665 BENNETT	RD.			
PIERSON, FL	32180 05			
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.				
	ט פוונוגע אטאראונג נוווא אנמנפווופווג וטו נוופ טעוטטפ טו טומוועוווע ווא ופעו	stered onice of regis	tered agent, or both, in the State of Fi	lorida.
		stered onice of regis	tered agent, or both, in the State of Fr	
	E: TERA L. MCNAUGHTON	stered onice of regis	tered agent, or both, in the State of Pr	03/04/2024
		stered onice of regis	tereo agent, or bour, in the State of Pr	
SIGNATURE	E: TERA L. MCNAUGHTON		tereo agent, or bour, in the State of Pr	03/04/2024
SIGNATURE	E: TERA L. MCNAUGHTON Electronic Signature of Registered Agent	Title	AMBR	03/04/2024
SIGNATURE Authorized	E: TERA L. MCNAUGHTON Electronic Signature of Registered Agent Person(s) Detail :			03/04/2024
SIGNATURE Authorized	E: TERA L. MCNAUGHTON Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	AMBR	03/04/2024
SIGNATURE Authorized Title Name	E: TERA L. MCNAUGHTON Electronic Signature of Registered Agent Person(s) Detail : AMBR MCNAUGHTON, TERA L 590 RAULERSON RD. NO.1	Title Name	AMBR MCNAUGHTON, BOBBY C 590 RAULERSON RD. NO.1	03/04/2024

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TERA MCNAUGHTON

MANAGER

03/04/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000090688

Entity Name: LEGACY AT OAK MEADOWS, LLC

## **Current Principal Place of Business:**

590 BENNETT RD. PIERSON, FL 32180

## **Current Mailing Address:**

FILED Mar 04, 2024 **Secretary of State** 5867329841CC