

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000218474

Entity Name: LEGACY TRUST PROPERTIES, LLC**Current Principal Place of Business:**5925 PRECISION DRIVE
SUITE # 4
ORLANDO, FL 32819**Current Mailing Address:**5925 PRECISION DRIVE
SUITE # 4
ORLANDO, FL 32819 US**FEI Number:** 86-3899011**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COWAN, CHAD E
5925 PRECISION DRIVE
SUITE # 4
ORLANDO, FL 32819 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

Authorized Person(s) Detail :

Title	AMBR	Title	MGR
Name	COWAN, KAREN L	Name	COWAN, CHAD E
Address	5925 PRECISION DRIVE SUITE # 4	Address	5925 PRECISION DRIVE SUITE # 4
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819
Title	TR	Title	TR
Name	COWAN, MCKENNA L	Name	COWAN, MACIE E
Address	5925 PRECISION DRIVE SUITE # 4	Address	5925 PRECISION DRIVE SUITE # 4
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819
Title	TR	Title	MGR
Name	COWAN, GRAYSON A	Name	COWAN, KAREN L
Address	5925 PRECISION DRIVE SUITE # 4	Address	5925 PRECISION DRIVE SUITE # 4
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819

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: KAREN L COWAN

AMBR, MGR

01/09/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date