#### 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: JILL CHICRAS OFFICE MANAGER

Electronic Signature of Signing Officer/Director Detail

# 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F0600006238

### Entity Name: LEGACY ENVIRONMENTAL CORPORATION

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

6390 MCKINLEY STREET NW SUITE 120 RAMSEY, MN 55303

#### **Current Mailing Address:**

6390 MCKINLEY STREET NW SUITE 120 RAMSEY, MN 55303

#### FEI Number: 25-1925068

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

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

#### **Officer/Director Detail :**

Title	OFFICER	Title	PRESIDENT
Name	ALMQUIST, DAVE M	Name	ADAIR, MIKE
Address	6390 MCKINLEY STREET NW: 120	Address	6390 MCKINLEY STREET NW: 120
City-State-Zip:	RAMSEY MN 55303	City-State-Zip:	RAMSEY MN 55303
Title	ST	Title	VP
Title Name	ST CHICRAS, JILL	Title Name	VP CHICRAS, PAUL

Certificate of Status Desired: No

03/06/2014

Date

## FILED Mar 06, 2014 Secretary of State CC7395631590

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

Date