

SCC eFile
(6/10)

2010 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

210504255

1.) CORPORATION NAME:

Legacy HealthCare Services, Inc.

DUE DATE: **12/30/2010**

SCC ID NO: **F1403585**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
NINA MUNGO
1008 JOSEPHINE CRESCENT
VIRGINIA BEACH, VA 23464**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	850

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3001 SPRING FOREST RD

CITY/ST/ZIP: RALEIGH, NC 27616-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: SANDRA HOSKINS
TITLE: PRESIDENT
ADDRESS: 3001 SPRING FOREST RD
CITY/ST/ZIP/CO: RALEIGH, NC 27616-

OFFICER

DIRECTOR

NAME: SHARON HOSKINS
TITLE: TREASURER
ADDRESS: 3001 SPRING FOREST RD
CITY/ST/ZIP/CO: RALEIGH, NC 27616-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ SANDRA HOSKINS

SANDRA HOSKINS, PRESIDENT

10/29/2010

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE
TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.