

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23538

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** THE LEXINGTON CLUB COMMUNITY ASSOCIATION, INC

**Current Principal Place of Business:**

C/O CUSTOM PROPERTY MANAGEMENT, INC.  
2328 SOUTH CONGRESS AVE., SUITE 2A  
WEST PALM BEACH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CUSTOM PROPERTY MANAGEMENT, INC.  
2328 SOUTH CONGRESS AVE., SUITE 2A  
WEST PALM BEACH, FL 33406 US

**New Mailing Address:**

**FEI Number:** 65-0028393

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES N. REYER, ATTORNEY AT LAW  
5301 N. FEDERAL HIGHWAY  
SUITE 130  
BOCA RATON, FL 33487 US

**Name and Address of New Registered Agent:**

CUSTOM PROPERTY MANAGEMENT, INC  
2328 S CONGRESS AVENUE  
SUITE 2A  
WEST PALM BEACH, FL 33406 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: JENNIFER ROGERS

04/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LEVINE, ROBERT  
Address: 2328 S CONGRESS AVE., STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP  
Name: DAVIDOFF, NORMAN  
Address: 2328 S CONGRESS AVE., STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP  
Name: HELLER, STEPHEN  
Address: 2328 S CONGRESS AVE., STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: S  
Name: BRANDOW, ALBERT  
Address: 2328 S CONGRESS AVE., STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T  
Name: COHEN, HEATHER  
Address: 2328 S CONGRESS AVE., STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

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: HEATHER COHEN

T

04/14/2010

Electronic Signature of Signing Officer or Director

Date