

N98000006983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

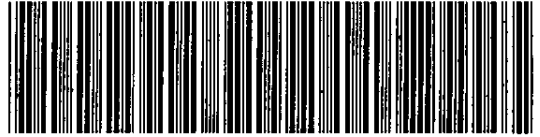
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2-19-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lexington Oaks of Pasco County Homeowners Association, Inc
(Name of Corporation)

DOCUMENT NUMBER: N98000006983.

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Smith

(Name of Contact Person)

Rampart Properties, Inc

(Firm/Company)

9887 Fourth Street N Suite #301

(Address)

Saint Petersburg FL 33702

(City/State and Zip Code)

For further information concerning this matter, please call:

Brian Smith

(Name of Contact Person)

at (727) 577-2200

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2010

LEXINGTON OAKS OF PASCO COUNTY HOA
% RAMPART PROPERTIES, INC.
9887 4TH STREET NORTH, SUITE 301
ST. PETERSBURG, FL 33702

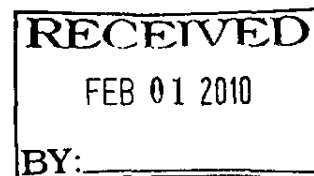
SUBJECT: LEXINGTON OAKS OF PASCO COUNTY HOMEOWNERS
ASSOCIATION, INC.
Ref. Number: N98000006983

We received this check with no attachments. To prevent delays in filing and improper application of fees, please return the check together with the appropriate document for filing.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 710A00002208



**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lexington Oaks of Pasco County Homeowners Association, Inc
2. The principal office address: 9887 Fourth Street N Suite #301
Saint Petersburg FL 33702
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: N98000006983
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Conley, Malley & Golson, P.A.

210 South Pinellas Avenue Suite #270

Tarpon Springs FL 34689

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Rampart Properties, Inc

9887 Fourth Street N Suite #301

(P.O. Box NOT acceptable)

Saint Petersburg FL 33702

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Rick Carroll - President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

January 4, 2010

(Date)

If signing on behalf of an entity:

Brian Smith

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)