

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 303129

FILED
Apr 16, 2009
Secretary of State

Entity Name: COLONIAL RIDGE LEXINGTON INC

Current Principal Place of Business:

5505 NORTH OCEAN BOULEVARD
OCEAN RIDGE, FL 33435

New Principal Place of Business:

Current Mailing Address:

5505 NORTH OCEAN BOULEVARD
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 59-1315249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN PORTER ACCOUNTING
400 S FEDERAL HWY
SUITE 404
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

GPS FIANCIAL SERVICES, INC.
400 S FEDERAL HWY
SUITE 404
BOYNTON BEACH, FL 33435 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: JOHN PORTER

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KERDOCK, RICHARD
Address: 141 HOSMER STREET
City-St-Zip: HUDSON, MA 01749

Title: D () Delete
Name: PORTER, JOHN
Address: 5505 N. OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: STD () Delete
Name: NUNN, BARBARA
Address: 11055 CYPRESS RUN CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: CUMMINGS, DAVID
Address: 9660 NW 28TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: CUMMINGS, MARTHA
Address: 9660 NW 28TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD KERDOK

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date