

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051825

FILED
May 02, 2007
Secretary of State

Entity Name: LEXINGTON PROPERTIES, LLC

Current Principal Place of Business:

4702 SHALE PLACE
TAMPA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 270099
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 55-0897482 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHNABEL, MARK
4403 RIDGELINE CIRCLE
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHNABEL, MARK
Address: 4403 RIDGELINE CIRCLE
City-St-Zip: TAMPA, FL 33624 US

Title: M () Delete
Name: MAI, DUK
Address: 16111 MUIRFIELD DRIVE
City-St-Zip: ODESSA, FL 33556 US

Title: M () Delete
Name: JOSEPH ZRELAK,
Address: 2223 EAST GRANT STREET
City-St-Zip: TAMPA, FL 33605 US

Title: M () Delete
Name: DAVIS, GLENN
Address: 4702 SHALE PLACE
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES:

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

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

Title: M (X) Change () Addition
Name: ZRELAK, JOSEPH
Address: 2223 EAST GRANT STREET
City-St-Zip: TAMPA, FL 33605 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK SCHNABEL

MGRM

05/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date