

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019639

FILED
Feb 22, 2009
Secretary of State

Entity Name: LEXINGTON ESTATES, LLC

Current Principal Place of Business:

20638 N.W. 78TH AVENUE
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

20638 NW 78TH AVENUE
ALACHUA, FL 32615

New Mailing Address:

20638 N.W. 78TH AVENUE
ALACHUA, FL 32615

FEI Number: 20-8538932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, MARK P
20638 NW 78TH AVENUE
ALACHUA, FL 32615 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: SULLIVAN, MARK P
Address: 20638 NW 78TH AVENUE
City-St-Zip: ALACHUA, FL 32615

Title: MGRM () Delete
Name: SULLIVAN, NANCY J
Address: 20638 NW 78TH AVENUE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES:

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 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 P SULLIVAN

MGRM

02/22/2009

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