

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003545

FILED
Jul 10, 2008
Secretary of State

Entity Name: LEXINGTON HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2002 N. LOIS AVENUE
SUITE 507
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2002 N. LOIS AVENUE
SUITE 507
TAMPA, FL 33607

New Mailing Address:

FEI Number: 55-0851557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LAMB, BRIAN K
2002 N. LOIS AVENUE
SUITE 507
TAMPA, FL 33607 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

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: THOMPSON, WES
Address: 714 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

Title: PD () Delete
Name: HAROLD, FRANK L
Address: 714 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

Title: STD () Delete
Name: SAILOR, SCOTT
Address: 714 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOEPNICK, JAMES
Address: 11476 57TH STREET CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

Title: VP (X) Change () Addition
Name: TREMMEL, ALLEN
Address: 11588 57TH STREET CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

Title: T (X) Change () Addition
Name: DOORES, STEPHEN
Address: 11455 52ND COURT EAST
City-St-Zip: PARRISH, FL 34219

Title: D () Change (X) Addition
Name: STAPLES, DAVID
Address: 11594 57TH STREET CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES KOEPNICK

P

07/10/2008

Electronic Signature of Signing Officer or Director

Date