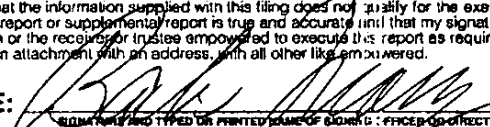


May 01 07 08:18a

ADVANCED PROPERTY

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90084 022 ****61.25

DOCUMENT # N04000004113					
1. Entity Name LEXINGTON COURT III CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1035 COLLIER CTR WAY 7 C/O ADVANCED PROPERTY MGMT SRVS., LLC BONITA SPRINGS, FL 34134			Mailing Address 1035 COLLIER CTR WAY 7 C/O ADVANCED PROPERTY MGMT SRVS., LLC BONITA SPRINGS, FL 34134		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-1873084	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent ADVANCED PROPERTY MGMT SERVICE, INC. 1035 COLLIER CTR WAY 7 NAPLES, FL 34110			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
6. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DVP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	CHANDLER, TOBY		NAME		
STREET ADDRESS	6355 LEXINGTON COURT, #102		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34110		CITY-ST-ZIP		
TITLE	DST	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	CORNILLIE, NANCY		NAME		
STREET ADDRESS	6325 LEXINGTON COURT, #201		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34110		CITY-ST-ZIP		
TITLE	DP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	MORELLO, FRANK		NAME		
STREET ADDRESS	6325 LEXINGTON COURT, #102		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34110		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate until that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Date: 5/3/07 Daytime Phone: #			