

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000005952

**FILED**  
**Jul 08, 2010**  
**Secretary of State**

**Entity Name:** LEXINGTON WOODS CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

2065 THOMASVILLE RD.  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

2065 THOMASVILLE RD.  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 27-2592760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EVANS, MONICA M. ESQ.  
3116 CAPITAL CIR., NE, STE. 5  
TALLAHASSEE, FL 32308 US

**Name and Address of New Registered Agent:**

DEAN, ROBERT JR  
2065 THOMASVILLE ROAD  
TALLAHASSEE, FL 32308 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: R. CARLTON DEAN

07/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: DEAN, R. CARLTON  
Address: 2065 THOMASVILLE RD.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DV  
Name: BENNETT, JIM  
Address: 3402 APALACHEE PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32311

Title: DST  
Name: JOHNSTON, MICHELE  
Address: 3402 APALACHEE PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32311

I hereby 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 all other like empowered.

SIGNATURE: R. CARLTON DEAN

P

07/08/2010

Electronic Signature of Signing Officer or Director

Date