2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23539

FILED Apr 28, 2009 Secretary of State

Entity Name: THE LEXINGTON CLUB VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

% BENCHMARK PROPERTY MANAGEMENT, INC. 7932 WILES RD.

C/O CUSTOM PROPERTY MANAGEMENT, INC. 2328 SOUTH CONGRESS AVE., SUITE 2A

CORAL SPRINGS, FL 33067

WEST PALM BEACH, FL 33406

Current Mailing Address:

New Mailing Address:

% BENCHMARK PROPERTY MANAGEMENT, INC. 7932 WILES RD.

C/O CUSTOM PROPERTY MANAGEMENT, INC. 2328 SOUTH CONGRESS AVE., SUITE 2A

CORAL SPRINGS, FL 33067

WEST PALM BEACH, FL 33406

FEI Number: 65-0027179

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BACKER LAW FIRM, PA 400 SOUTH DIXIE HIGHWAY, SUITE 420 BOCA RATON, FL 33432

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

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete JACOBSON, CONNIE Name: 7844 C LEXINGTON CLUB BLVD Address: DELRAY BEACH, FL 33446 City-St-Zip:

Address: 7844 C LEXINGTON CLUB BLVD City-St-Zip: DELRAY BEACH, FL 33446

Title: () Delete SHAFRAN, ALBERT Name:

Title: () Change () Addition Name:

Address: 7828 C LEXINGTON CLUB BLVD Address: City-St-Zip:

Name:

City-St-Zip: DELRAY BEACH, FL 33446

Title: **VPS** (X) Change () Addition

VACOBSON, CONSTANCE

Title: () Delete LEVY, BENNIE Name:

Name: MARGULIS, IRWIN Address:

7681 D LEXINGTON CLUB BLVD Address: City-St-Zip: DELRAY BEACH, FL 33446

7836 ALEXINGTON CLUB BLVD City-St-Zip: DELRAY BEACH, FL 33446

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: ALBERT SHAFRAN Ρ 04/28/2009