

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2006 8:00 am**  
**Secretary of State**

04-13-2006 90296 008 \*\*\*\*61.25

**DOCUMENT # N94000003813**

1. Entity Name  
**THE VILLAGE OF LEXINGTON PROPERTY OWNERS'  
ASSOCIATION, INC.**



Principal Place of Business  
**1900 WATERFORD DRIVE  
VERO BEACH, FL 32966**

Mailing Address  
**3240 CARDINAL DR., SUITE 200  
VERO BEACH, FL 32963 US**

**50011469**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01132006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**65-0514887**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHLITT PROPERTY MANAGEMENT  
3240 CARDINAL DR., #200  
VERO BEACH, FL 32966**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

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 PD ☐ Delete  
NAME DE GROOTE, JOE  
STREET ADDRESS 1660 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP. ☐ Delete  
NAME BROOME, SHARON  
STREET ADDRESS 1647 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME BARNARD, FRAN  
STREET ADDRESS 1765 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME GILL, ELLIE  
STREET ADDRESS 1757 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME DE PIETRO, DON  
STREET ADDRESS 1785 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE D ☐ Change ☒ Addition  
NAME AUGUSTINE RUTH  
STREET ADDRESS 1610 AYNLEY WAY  
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 and 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:

*Fran Barnard*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/5/06*

Date

*772-778-0165*

Daytime Phone #

FRAN BARNARD