

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90035 029 ****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



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
65-0514887

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

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 constituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BROOME, SHARON	
STREET ADDRESS	1647 AYNLEY WAY	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARNARD, FRAN	
STREET ADDRESS	1765 AYNLEY WAY	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	T	<input type="checkbox"/> Delete
NAME	GILL, ELLIE	
STREET ADDRESS	1757 AYNLEY WAY	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	P	<input type="checkbox"/> Delete
NAME	AUGUSTINE, RUTH	
STREET ADDRESS	1610 AYNLEY WAY	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	V.P. Charlotte Hill	<input type="checkbox"/> Delete
NAME	1715 Aynsley Way	
STREET ADDRESS	VERO BEACH, FL 32966	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Linda Bowman	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1715 Aynsley Way	
STREET ADDRESS	VERO BEACH, FL 32966	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V.P. Charlotte Hill	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1715 Aynsley Way	
STREET ADDRESS	VERO BEACH, FL 32966	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 Section 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: Ruth Augustine RUTH AUGUSTINE

2/21/08

248-890-6449