

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90082 024 ****61.25

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DOCUMENT # N97000004230	
1. Entity Name SUTTON WALK AT LEXINGTON CONDOMINIUM ASSOCIATION, INC.	
Principal Place of Business 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908 US	Mailing Address 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908 US
2. Principal Place of Business - No P.O. Box #	3. Mailing Address

P & M Property Management
14360 So. Tamiami Trail, Unit B
Fort Myers, Florida 33912

P & M Property Management
14360 So. Tamiami Trail, Unit B
Fort Myers, Florida 33912

122007 Chg-NP CR2E037 (12/06)

El Number 35-0734979	Applied For <input type="checkbox"/> Not Applicable
Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SAPP, PAUL L %P&M PROPERTY MANAGEMENT 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908		7. Name and Address of New Registered Agent Name Paul Sapp P & M Property Management 14360 So. Tamiami Trail, Unit B Fort Myers, Florida 33912 Zip Code L	
8. The above named entity submits this statement for the purpose of changing its registered agent. SIGNATURE Paul S. Sapp 4-20-07 (NOTE: Registered Agent signature required when reinstating)			

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROOKOVER, JAMES 15660 SAN CARLOS BLVD, #40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail, #B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLOCHANY, GEORGE 15660 SAN CARLOS BLVD, # 40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail, #B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LYNCH, JAMES 15660 SAN CARLOS BLVD, #40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail, #B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLEN, WILLIAM JR 15660 SAN CARLOS BLVD, # 40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail, #B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DETTY, LINDA 15660 SAN CARLOS BLVD, # 40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail, #B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **James D. Lynch** **2-14-07 239-415-4972**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #