

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000043576

1. Entity Name
LEXON FINANCIAL CORPORATION

Principal Place of Business
22735 SW 66TH AVENUE #201
BOCA RATON FL 33428

Mailing Address
22735 SW 66TH AVENUE #201
BOCA RATON FL 33428

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1008864

Applied For

Not Applicable

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MURPHY, THOMAS D
22735 SW 66TH AVENUE #201
BOCA RATON FL 33428 ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Thomas D. Murphy* JIR Thomas D. Murphy 9/15/01 561-601-3418
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90010 005 ***150.00



DO NOT WRITE IN THIS SPACE

0075170 AV

CR2E034 (5/01)

Attachment
#P000000043576
979346

Lexon Financial Corporation
22735 SW 66th Ave, #201
Boca Raton, FL 33428


Department of State
P.O. Box 1500
Tallahassee, FL 32302-1500
September 15, 2001

In accordance with my phone conversation on September 12, 2001, I am including check # 235 for \$150.00 for the annual Uniform Business Report Filings versus the \$550.00 fee printed on the form I received, as I did not receive a notice in January 2001. The corporation was established late May 2000 and that may be the reason for receiving no notice but I did not receive one.

If you have any questions, please call me at 561-601-3418.

Thank you.

Sincerely,


Thomas D Murphy
President