

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158836

FILED  
Apr 01, 2005  
Secretary of State

Entity Name: LEXLAND CORP.

## Current Principal Place of Business:

3295 MEGAN LANE  
NAPLES, FL 34109

## New Principal Place of Business:

3295 MEGAN LANE  
#3  
NAPLES, FL 34109

## Current Mailing Address:

3295 MEGAN LANE  
NAPLES, FL 34109

## New Mailing Address:

3295 MEGAN LANE  
#3  
NAPLES, FL 34109

FEI Number: 20-1913390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HYLAND, SHAWN  
3295 MEGAN LANE  
NAPLES, FL 34109 US

## Name and Address of New Registered Agent:

HYLAND, SHAWN  
3295 MEGAN LANE  
#3  
NAPLES, FL 34109 US

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: \_\_\_\_\_

04/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HYLAND, SHAWN  
Address: 3295 MEGAN LANE  
City-St-Zip: NAPLES, FL 34109

Title: T ( ) Delete  
Name: HYLAND, JULIE A  
Address: 3295 MEGAN LANE  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HYLAND, SHAWN  
Address: 3295 MEGAN LANE #3  
City-St-Zip: NAPLES, FL 34109

Title: T (X) Change ( ) Addition  
Name: HYLAND, JULIE A  
Address: 3295 MEGAN LANE #3  
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAWN HYLAND

P

04/01/2005

Electronic Signature of Signing Officer or Director

Date