

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000009384

Entity Name: LEXINGTON HOMES, INC.

FILED
Jan 13, 2004
Secretary of State

Current Principal Place of Business:

5623 US HWY 19
STE 201
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 670
PORT RICHEY, FL 34673 US

New Mailing Address:

FEI Number: 59-3293525 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIEBE, CRAIG
11046 LAKEVIEW DR
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: FIEBE, CRAIG J
Address: 11046 LAKEVIEW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: P () Delete
Name: GALLAGHER, CRAIG S
Address: 6115 GUILFORD DR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CRAIG J. FIEBE

V

01/13/2004

Electronic Signature of Signing Officer or Director

Date