

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000009384

Entity Name: LEXINGTON HOMES, INC.

FILED
Apr 27, 2007
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 J CEO
5623 US HWY 19
STE 201
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

FIEBE, CRAIG J
5623 US HWY 19
STE 201
NEW PORT RICHEY, FL 34652 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: CRAIG J FIEBE

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: FIEBE, CRAIG J
Address: 1560 GULF BLVD UNIT 501
City-St-Zip: CLEARWATER, FL 33767

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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIEBE, CRAIG J
Address: 1560 GULF BLVD UNIT 501
City-St-Zip: CLEARWATER, FL 33767

Title: D (X) Change () Addition
Name: GALLAGHER, CRAIG S
Address: 6115 GUILFORD DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S () Change (X) Addition
Name: FIEBE, LUISA
Address: 1560 GULF BLVD UNIT 501
City-St-Zip: CLEARWATER, FL 33767

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LUISA FIEBE

S

04/27/2007

Electronic Signature of Signing Officer or Director

Date