

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000009384

Entity Name: LEXINGTON HOMES, INC.

FILED  
Apr 09, 2008  
Secretary of State

## Current Principal Place of Business:

10220 US HIGHWAY 19N  
SUITE 301  
PORT RICHEY, FL 34668 US

## New Principal Place of Business:

## Current Mailing Address:

10220 US HIGHWAY 19N  
SUITE 301  
PORT RICHEY, FL 34668 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  
5623 US HWY 19  
STE 201  
NEW PORT RICHEY, FL 34652 US

## Name and Address of New Registered Agent:

FIEBE, CRAIG J  
10220 US HIGHWAY 19N  
SUITE 301  
PORT RICHEY, FL 34668 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:

04/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FIEBE, CRAIG J  
Address: 10220 US HIGHWAY 19N, SUITE 301  
City-St-Zip: PORT RICHEY, FL 34668

Title: V (X) Change ( ) Addition  
Name: FIEBE, LUISA  
Address: 10220 US HIGHWAY 19N, SUITE 301  
City-St-Zip: PORT RICHEY, FL 34668

Title: S ( ) Change (X) Addition  
Name: FIEBE, LUISA  
Address: 10220 US HIGHWAY 19N, SUITE 301  
City-St-Zip: PORT RICHEY, FL 34668

Title: T ( ) Change (X) Addition  
Name: FIEBE, LUISA  
Address: 10220 US HIGHWAY 19N, SUITE 301  
City-St-Zip: PORT RICHEY, FL 34668

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: CRAIG J FIEBE

P

04/09/2008

Electronic Signature of Signing Officer or Director

Date