

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000001072

**Entity Name:** LEXINGTON OAKS COMMONS OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 08, 2024**  
**Secretary of State**  
**2749663556CC**

**Current Principal Place of Business:**

2905 BAYSHORE BLVD  
STE 200  
TAMPA, FL 33629

**Current Mailing Address:**

2905 BAYSHORE BLVD  
STE 200  
TAMPA, FL 33629 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DEAKIN, GEORGE  
2905 BAYSHORE BLVD  
STE 200  
TAMPA, FL 33629 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D, PRESIDENT  
Name TALLICHET, JOHN  
Address 150 PAULARINO AVE, BLDG C  
City-State-Zip: COSTA MESA CA 92626

Title D, VP  
Name SENCAK, DIANE  
Address 150 PAULARINO AVE, BLDG C  
City-State-Zip: COSTA MESA CA 92626

Title D, TREASURER  
Name HUTCHESON, TAMMY  
Address 150 PAULARINO AVE, BLDG C  
City-State-Zip: COSTA MESA CA 92626

Title D, SECRETARY  
Name DEAKIN, BARBARA  
Address 2905 BAYSHORE BLVD  
SUITE 200  
City-State-Zip: TAMPA FL 33629

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BARBARA DEAKIN**

**SECRETARY**

**04/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date