

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23538

**Entity Name:** THE LEXINGTON CLUB COMMUNITY ASSOCIATION, INC**Current Principal Place of Business:**C/O CASTLE MANAGEMENT  
7799 LEXINGTON CLUB BLVD  
DELRAY BEACH, FL 33446**Current Mailing Address:**C/O CASTLE MANAGEMENT  
7799 LEXINGTON CLUB BLVD.  
DELRAY BEACH, FL 33446 US**FEI Number:** 65-0395794**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZOBER, STUART J ESQ.  
2295 N.W. CORPORATE BLVD  
STE 140  
BOCA RATON, FL 33431 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:** STUART ZOBER

04/30/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY
Name	SANDERS, JUDY
Address	7799 LEXINGTON CLUB BLVD
City-State-Zip:	DELRAY BEACH FL 33446

Title	VP
Name	POLIS, JOSEPH
Address	7799 LEXINGTON CLUB BLVD
City-State-Zip:	DELRAY BEACH FL 33446

Title	TREASURER
Name	SCHLEIFER, JOEL
Address	7799 LEXINGTON CLUB BLVD
City-State-Zip:	DELRAY BEACH FL 33446

Title	VP, 2ND
Name	GIANCOLA, FRED
Address	7799 LEXINGTON CLUB BLVD
City-State-Zip:	DELRAY BEACH FL 33446

Title	PRESIDENT
Name	WECHSLER, DON
Address	7799 LEXINGTON CLUB BLVD
City-State-Zip:	DELRAY BEACH FL 33446

*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:** DON WECHSLER

PRESIDENT

04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date