

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45019

Entity Name: LEXINGTON LAKES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**3900 WOODLAKE BLVD STE 309
LAKE WORTH, FL 33463**Current Mailing Address:**3900 WOODLAKE BLVD STE 309
LAKE WORTH, FL 33463 US**FEI Number:** 65-0287175**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPLAN, LOUIS ESQ
SACHS & SAX
6111 BROKEN SOUND PKWY., NW, SUITE 200
BOCA RATON, FL 33487 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	TREASURER
Name	BAKER , DEBBIE
Address	3900 WOODLAKE BLVD STE 309
City-State-Zip:	LAKE WORTH FL 33463

Title	VP
Name	DALY, GRACE
Address	3900 WOODLAKE BLVD STE 309
City-State-Zip:	LAKE WORTH FL 33463

Title	SECRETARY
Name	GATES, STEVEN
Address	3900 WOODLAKE BVD. 309
City-State-Zip:	LAKE WORTH FL 33463

Title	PRESIDENT
Name	SHERWOOD, CAROLE
Address	3900 WOODLAKE BVD. 309
City-State-Zip:	LAKE WORTH FL 33463

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: CAROLE SHERWOOD**PRESIDENT****01/17/2023**

Electronic Signature of Signing Officer/Director Detail

Date