## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45019

Entity Name: LEXINGTON LAKES HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 30, 2024
Secretary of State
2105031433CC

## **Current Principal Place of Business:**

GRS COMMUNITY MANAGEMENT WOODLAKE BLVD 309 LAKE WORTH, FL 33463

# **Current Mailing Address:**

GRS COMMUNITY MANAGEMENT 3900 WOODLAKE BLVD 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 DIRECTOR Title DIRECTOR

Name PUCEK, DAWN Name ORSINI SR, EFRAIN

Address GRS COMMUNITY MANAGEMENT Address GRS COMMUNITY MANAGEMENT

WOODLAKE BLVD 309 WOODLAKE BLVD 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT Title SECRETARY

Name SHERWOOD, CAROLE Name PARRISH, JACOB

Address GRS COMMUNITY MANAGEMENT Address GRS COMMUNITY MANAGEMENT

WOODLAKE BLVD 309 WOODLAKE BLVD 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title TREASURER Title VP

Name BAKER, DEBORAH Name PIERCE , CONNIE

Address GRS COMMUNITY MANAGEMENT Address GRS COMMUNITY MANAGEMENT

WOODLAKE BLVD 309 WOODLAKE BLVD 309

City-State-Zip: LAKE WORTH FL 33463 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.