

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G83658

**Entity Name:** LEXINGTON CUTTER, INC.**Current Principal Place of Business:**2951 63RD AVE E  
BRADENTON, FL 34203**Current Mailing Address:**2951 63RD AVE E  
BRADENTON, FL 34203**FEI Number: 59-2797999****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ENANDER, PAUL J.  
7116 SADDLECREEK WAY  
SARASOTA, FL 34241 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	PTD
Name	ENANDER, PAUL J.
Address	7116 SADDLECREEK WAY
City-State-Zip:	SARASOTA FL 34203

Title	SD
Name	ENANDER, LAURIE D.
Address	7116 SADDLECREEK WAY
City-State-Zip:	SARASOTA FL 34203

Title	VP
Name	ST. ESPRIT, JUNITA
Address	3290 49TH STREET
City-State-Zip:	SARASOTA FL 34235

Title	VP
Name	TRAMMELL, JAMES L
Address	PO BOX 20891
City-State-Zip:	BRADENTON FL 34204

Title	VP
Name	ENANDER, BRYAN P
Address	2951 63RD AVE E
City-State-Zip:	BRADENTON FL 34203

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

**SIGNATURE: PAUL ENANDER****PRESIDENT****02/18/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date