

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

DOCUMENT# 761497

**Entity Name:** LEXINGTON SQUARE ASSOCIATION, INC.

**Current Principal Place of Business:**

8000 SOUTH US 1, SUITE 402  
PT ST LUCIE, FL 34952

**Current Mailing Address:**

8000 SOUTH US 1, SUITE 402  
PT ST LUCIE, FL 34952

**FEI Number:** 59-2263402

**Certificate of Status Desired:** No

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

WYNNE, ERIC P  
8000 SOUTH US 1  
402  
PT ST LUCIE, FL 34952 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 PD  
Name RODRIGUEZ, STEVEN  
Address 8000 SOUTH US 1, STE. 402  
City-State-Zip: PORT SAINT LUCIE FL 34952

Title DIRECTOR  
Name CURROLO, THOMAS  
Address 8000 SOUTH US 1, SUITE 402  
City-State-Zip: PT ST LUCIE FL 34952

Title VP, TD  
Name WYNNE, ERIC P.  
Address 8000 SOUTH US 1, SUITE 402  
City-State-Zip: PORT SAINT LUCIE FL 34952

Title DIRECTOR  
Name SULLIVAN, GERARD  
Address 8000 SOUTH US 1, SUITE 402  
City-State-Zip: PT ST LUCIE FL 34952

*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:** STEVEN RODRIGUEZ

PD

04/17/2024

Electronic Signature of Signing Officer/Director Detail

Date