

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27577

**Entity Name:** KEEWIN-LEXINGTON PARK OWNERS' ASSOCIATION, INC.

**FILED**  
**Mar 07, 2022**  
**Secretary of State**  
**4137149649CC**

**Current Principal Place of Business:**

C/O NAI REALVEST  
1800 PEMBROOK DRIVE, SUITE 350  
ORLANDO, FL 32810

**Current Mailing Address:**

C/O NAI REALVEST  
1800 PEMBROOK DRIVE, SUITE 350  
ORLANDO, FL 32810 US

**FEI Number: 59-2906850**

**Certificate of Status Desired: No**

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

FIGLIOLIA, DEE  
1800 PEMBROOK DRIVE SUITE 350  
ORLANDO, FL 32810 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 SECRETARY  
Name GEORGE, KRIS  
Address 901 N. LAKE DESTINY DR, STE 110  
City-State-Zip: MAITLAND FL 32751

Title VP  
Name STRAUS, HILARY  
Address 237 LOOKOUT PLACE  
City-State-Zip: MAITLAND FL 32751

Title OTHER  
Name PASQUA, CURT D  
Address 167 LOOKOUT PLACE  
City-State-Zip: MAITLAND FL 32751

Title TREASURER  
Name PARKS, LINDA  
Address 203 LOOKOUT PLACE  
City-State-Zip: MAITLAND FL 32751

Title PRESIDENT  
Name RHODE, CHRISS  
Address 230 LOOKOUT PLACE  
City-State-Zip: MAITLAND FL 32751

*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: CHRISS RHODE**

**PRESIDENT**

**03/07/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date