

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007677

**Entity Name:** ARTESA HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Mar 21, 2018**  
**Secretary of State**  
**CC0537690637**

**Current Principal Place of Business:**

1500 GATEWAY BLVD  
SUITE 220  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

PO BOX 244225  
BOYNTON BEACH, FL 33424

**FEI Number: 02-0597318**

**Certificate of Status Desired: No**

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

VICTORY ACCOUNTING, INC.  
1500 GATEWAY BLVD  
SUITE 220  
BOYNTON BEACH, FL 33426 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           SHERRI, BARBARA  
Address        PO BOX 244225  
City-State-Zip: BOYNTON BEACH FL 33424

Title           SD  
Name           JOSEPH, TERESA  
Address        PO BOX 244225  
City-State-Zip: BOYNTON BEACH FL 33424

Title           PRESIDENT  
Name           FINLEY, CHRISTOPHER  
Address        PO BOX 244225  
City-State-Zip: BOYNTON BEACH FL 33424

Title           VP  
Name           SCHWARTZ, SCOTT  
Address        PO BOX 244225  
City-State-Zip: BOYNTON BEACH FL 33424

*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: FINLEY, CHRISTOPHER**

**PRESIDENT**

**03/21/2018**

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

\_\_\_\_\_  
Date