2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005805

Entity Name: REFLECTIONS WEST HOMEOWNERS ASSOCIATION, INC.

FILED Feb 17, 2021 Secretary of State 1819582623CC

Current Principal Place of Business:

1631 E. VINE STREET C/O ARTEMIS LIFESTYLES, INC SUITE 300 KISSIMMEE, FL 34744

Current Mailing Address:

1631 E. VINE STREET C/O ARTEMIS LIFESTYLES, INC SUITE 300 KISSIMMEE, FL 34744 US

FEI Number: 56-2297232 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARTEMIS LIFESTYLE SERVICES, INC. 1631 E. VINE STREET SUITE 300 KISSIMMEE, FL 34744 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: DAVID BURMAN 02/17/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title PRESIDENT
Name WALKER, THERESA Name HALL, RON

Address 1631 E. VINE STREET Address 1631 E. VINE STREET

C/O ARTEMIS LIFESTYLES, INC SUITE C/O ARTEMIS LIFESTYLES, INC SUITE

City-State-Zip: KISSIMMEE FL 34744 City-State-Zip: KISSIMMEE FL 34744

Title TREASURER Title DIRECTOR

Name PHILLIPS, KATERINA Name MILLSAPS, MICKEY

Address 1631 E. VINE STREET Address 1631 E. VINE STREET C/O ARTEMIS LIFESTYLES, INC SUITE 1631 E. VINE STREET C/O ARTEMIS LIFESTYLES, INC SUITE

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City-State-Zip: KISSIMMEE FL 34744 City-State-Zip: KISSIMMEE FL 34744

Title SECRETARY
Name ODUM, DENISE

Address 1631 E. VINE STREET

C/O ARTEMIS LIFESTYLES, INC SUITE

300

City-State-Zip: KISSIMMEE FL 34744

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: RON HALL BOARD PRESIDENT 02/17/2021