

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005805

Entity Name: REFLECTIONS WEST HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 18, 2020
Secretary of State
5760435071CC

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

03/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name WHITT, JERROLD R
Address 1631 E. VINE STREET
C/O ARTEMIS LIFESTYLES, INC SUITE
300
City-State-Zip: KISSIMMEE FL 34744

Title VP
Name HALL, RON
Address 1631 E. VINE STREET
C/O ARTEMIS LIFESTYLES, INC SUITE
300
City-State-Zip: KISSIMMEE FL 34744

Title SECRETARY/ TREASURER
Name PHILLIPS, KATERINA
Address 1631 E. VINE STREET
C/O ARTEMIS LIFESTYLES, INC SUITE
300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name MILLSAPS, MICKEY
Address 1631 E. VINE STREET
C/O ARTEMIS LIFESTYLES, INC SUITE
300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
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: JERROLD WHITT

PRESIDENT

03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date