## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001994

Entity Name: CARTER GLEN CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 06, 2020 **Secretary of State** 3780894340CC

## **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: 20-4639181 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KISSIMMEE FL 34744

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 04/06/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** Name KREBS, BRENT Name CAMPOS, PABLO

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

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

KISSIMMEE FL 34744

City-State-Zip: City-State-Zip:

**DIRECTOR** Title Title DIRECTOR

MONK, BRIAN THORSTEINSSON, GUDMUNDUR Name Name

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

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.