

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003806

Entity Name: HOMEOWNERS' ASSOCIATION OF LEGACY PARK, INC.

Current Principal Place of Business:

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

Current Mailing Address:

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

FEI Number: 65-1247173

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

04/11/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

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

Title SECRETARY
Name JACKSON, JANINE
Address C/O ARTEMIS LIFESTYLES, INC
1631 E. VINE STREET, 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: JOSEPH MILLER

PRESIDENT

04/11/2024

Electronic Signature of Signing Officer/Director Detail

Date