## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011050

Entity Name: PALM RIVER TOWNHOMES HOMEOWNERS ASSOCIATION,

INC.

FILED
Mar 02, 2021
Secretary of State
3806288017CC

## **Current Principal Place of Business:**

1631 EAST VINE STREET

STE 300

KISSIMMEE, FL 34744

## **Current Mailing Address:**

1631 EAST VINE STREET STE 300 KISSIMMEE, FL 34744 US

FEI Number: 20-4354030 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARTEMIS CONNECTED, LLC 1631 EAST VINE STREET STE 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: LORI DANN 03/02/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name RYAN, JOHN S Name LAWSON, MICHAEL S

Address 2502 N. ROCKY POINT DRIVE Address 2502 N. ROCKY POINT DRIVE

SUITE 1050 SUITE 1050

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title TREASURER Title DIRECTOR

Name PARSONS, LAUREN Name KULKARNI, RAGHAVENDRA

Address 2502 N. ROCKY POINT DRIVE Address 1631 EAST VINE STREET

SUITE 1050 STE 300

City-State-Zip: TAMPA FL 33607 City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR Title DIRECTOR

Name PRICE, LORI Name WRIGHT, JONATHON

Address 1631 EAST VINE STREET Address 1631 EAST VINE STREET

STE 300 STE 300

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.

SIGNATURE: LAUREN PARSONS TREASURER 03/02/2021