

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002047

FILED
Feb 02, 2023
Secretary of State
2457030276CC

Entity Name: VIZCAYA MASTER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

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

Current Mailing Address:

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

FEI Number: 59-3676043

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARTEMIS LIFESTYLE SERVICES, INC.
1631 E. VINE STREET
C/O ARTEMIS LIFESTYLE SERVICES, INC. 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: BEN KAPLAN

02/02/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR-PRESIDENT
Name KAPLAN, BEN
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 INC. SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR-TREASURER
Name DIVINE, SERGIO
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 INC. SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR-VP
Name MENENDEZ, FERNANDO
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 INC. SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR-SECRETARY
Name DIVINE, SERGIO
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 INC. SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name CARTIER, JOYCE
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 INC. SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name MENDEZ, JOHN
Address 1631 E. VINE STREET
 C/O ARTEMIS LIFESTYLE SERVICES,
 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: BEN KAPLAN

PRESIDENT

02/02/2023

Electronic Signature of Signing Officer/Director Detail

Date