

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000004162

**Entity Name:** BEACON PARK MASTER HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Mar 26, 2020**  
**Secretary of State**  
**8275860470CC****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:** 20-5778285**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LANDOL LAW FIRM, PA  
2101 NW CORPORATE BLVD STE 410  
BOCA RATON, FL 33431 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

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

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

Title	SECRETARY, TREASURER
Name	ABREU, MARIA
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:** JASMINE FALCON**PRESIDENT****03/26/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date