## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000004518

Entity Name: LOREN COVE NEIGHBORHOOD ASSOCIATION, INC.

**FILED** Apr 29, 2024 **Secretary of State** 5132805837CC

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

1631 E. VINE STREET SUITE 300

KISSIMMEE, FL 34744

## **Current Mailing Address:**

1631 E. VINE STREET SUITE 300 KISSIMMEE, FL 34744 US

FEI Number: 81-5298313 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: DIANE BRASWELL 04/29/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

Name POHL, GILBERT Name GUSTAFSON, PEGGY

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

SUITE 300 SUITE 300

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

Title **DIRECTOR** Title **TREASURER** 

Name MARINO-VITANI, VINCENT Name BONECUTTER, LEE

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

> SUITE 300 SUITE 300

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

Title ٧P

BERRY, CHARNA Name

1631 E. VINE STREET Address

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.

04/29/2024 SIGNATURE: GILBERT POHL **PRESIDENT**