

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N45062

**Entity Name:** WESTRIDGE HOMEOWNERS' ASSOCIATION, INC.**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:** 59-3106649**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DANN, LORI COO  
1631 E. VINE STREET  
C/O ARTEMIS LIFESTYLES, 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:** LORI DANN

04/25/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

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

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

Title            TREASURER  
Name           HERNANDEZ, ABNER  
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:** KATIE BRATTLE

PRESIDENT

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date