

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
 04-25-2001 90018 024 ****61.25

01/03/01

DOCUMENT # N30307

1. Entity Name

PERIDIA PATIO HOMEOWNERS 5 ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MA-CON INC
 2198 PRINCETON STREET #20
 SARASOTA FL 34237

C/O MA-CON INC
 2198 PRINCETON STREET #20
 SARASOTA FL 34237

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0171359

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEIL, WARREN
C/O MA-CON INC.
2198 PRINCETON STREET #20
SARASOTA FL 34237

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME VPD BENNETT, DICK
 STREET ADDRESS 4223 MURFIELD DR E
 CITY-ST-ZIP BRADENTON FL 34203

TITLE Change Addition
 NAME JOHN ALVERAS
 STREET ADDRESS 4110 MURFIELD DR E
 CITY-ST-ZIP BRADENTON, FL 34203

TITLE Delete
 NAME TD CHACEY, DAVID
 STREET ADDRESS 4211 MURFIELD DRIVE EAST
 CITY-ST-ZIP BRADENTON FL 34203

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME SD POLLOCK, CYNTHIA
 STREET ADDRESS 4102 MURFIELD DR E
 CITY-ST-ZIP BRADENTON FL 34203

TITLE Change Addition
 NAME S DOROTHY CHRISTIAN
 STREET ADDRESS 4107 MURFIELD DR E.
 CITY-ST-ZIP BRADENTON, FL 34203

TITLE Delete
 NAME PD WILLIAMS, LOUISE
 STREET ADDRESS 4315 MURFIELD DRIVE EAST
 CITY-ST-ZIP BRADENTON FL 34203

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME D RADOCCIA, REYNOLD
 STREET ADDRESS 4037 MURFIELD DRIVE EAST
 CITY-ST-ZIP BRADENTON FL 34203

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Louise Williams* LOUISE WILLIAMS 4-20-01 941-366-8480
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)