

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

04 APR -9 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N30306

1. Corporation Name

PERIDIA PATION HOMEOWNERS ASSOCIATION INC.

REINSTATEMENT 01-04

2. Principal Office Address

Ma-Con Inc.

3. Mailing Office Address

Ma-Con Inc.

Suite, Apt. #, etc.

2198 Princeton St.

Suite 20

Sarasota, FL 34237

Zip

34237

Country

Sarasota

Suite, Apt. #, etc.

2198 Princeton St.

Suite 20

Sarasota, FL 34237

Zip

34237

Country

Sarasota

4. Date Incorporated or Qualified  
To Do Business in Florida

01/23/1989

5. FEI Number

65-0320210

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Warren Weil

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

2198 Princeton St.

Suite, Apt. #, Etc.

Suite 20

City

Sarasota

State

FL

Zip Code

34237

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

x Warren Weil

Date

3/18/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ARTHUR SCHOOLEY	4855 RAINTREE CIRCHLE E	BRADENTON, FL 34203
VD	DELORES DOMERMUTH	4842 RAINTREE CIRCLE E.	BRADENTON, FL 34203
SD	JOANN KRATZMILLER	4807 RAINTREE CIRCLE E.	BRADENTON, FL 34203
D	DONALD FORTUNE	4411 MURFIELD DR. E.	BRADENTON, FL 34203
D	JULIA MCRAE	4826 RAINTREE CIRCLE E.	BRADENTON, FL 34203
D	SUSAN BRITE	4822 RAINTREE CIRCLE E.	BRADENTON, FL 34203

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur Schooley April 5th 2004

Date

Daytime Phone #

CR2E081 (01/04)

7



a management / consultation company

March 18, 2004

Florida Department of State  
Division of Corporation  
P O Box 6327  
Tallahassee, Fl 32314

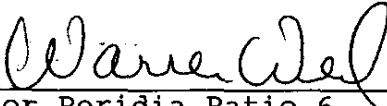
Re: Corporation Reinstatement of Peridia Patio HOA  
Document #N30306

To Whom It May Concern:

We recently were advised the Annual Corporation Report had not been submitted for 2001, 2002 and 2003. No report had been received as the address change on the report of year 2000 had not been made by Department of State. We enclose copy of 2000 return reflecting address change.

Enclosed please find completed reinstatement form and check for \$245.00. Please advise if any further information is required.

Sincerely,

  
for Peridia Patio 6  
HOA