## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N30306

FILED Mar 28, 2012 Secretary of State

Entity Name: PERIDIA PATIO HOMEOWNERS 6 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4900 MANATEE AVENUE WEST 1111 3RD AVENUE WEST SUITE 104 SUITE 200

BRADENTON, FL 34209 BRADENTON, FL 34205

Current Mailing Address: New Mailing Address:

4900 MANATEE AVENUE WEST SUITE 104 BRADENTON, FL 34209

1111 3RD AVENUE WEST SUITE 200 BRADENTON, FL 34205

FEI Number: 65-0320210 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLATINUM COMMUNITY MANAGEMENT
4900 MANATEE AVENUE WEST
SUITE 104
PLATINUM COMMUNITY MANAGEMENT
1111 3RD AVENUE WEST
SUITE 200

BRADENTON, FL 34209 US BRADENTON, FL 34205 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: IRENE CARRUOLO, LCAM 03/28/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: VP

Name: MURRAY, LEONARD

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

Title: F

Name: WOOD, DON

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

Title: VP

Name: LYNESS, GARY

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

Title: 9

Name: MARSHELLO, JUDY

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

Title:

Name: WILLMORE, DAVID

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

Title:

Name: WILLIAMS, MARY

Address: 1111 3RD AVENUE WEST, STE. 200

City-St-Zip: BRADENTON, FL 34205

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: IRENE CARRUOLO LCAM 03/28/2012