

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30306

Entity Name: PERIDIA PATIO HOMEOWNERS 6 ASSOCIATION, INC.**Current Principal Place of Business:**5602 MARQUESAS CIRCLE
SUITE 102-9
SARASOTA, FL 34253**Current Mailing Address:**P.O. BOX 18809
SARASOTA, FL 34276 US**FEI Number:** 65-0320210**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SARASOTA ASSOCIATION MANAGEMENT GROUP, INC.
5602 MARQUESAS CIRCLE
SUITE 102-9
SARASOTA, FL 34253 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:** MICHELLE THIBEAULT

04/08/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name MURRAY, LEONARD
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

Title VP
Name WOOD, DON
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

Title PRESIDENT
Name SCHNEIDER, PETER
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

Title S
Name MARSHELLO, JUDY
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

Title D
Name WILLMORE, DAVID
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

Title T
Name WILLIAMS, MARY
Address 5602 MARQUESAS CIRCLE
SUITE 102-9
City-State-Zip: SARASOTA FL 34253

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: PETER SCHNEIDER

PRESIDENT

04/08/2013

Electronic Signature of Signing Officer/Director Detail

Date