

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748936

**Entity Name:** PARKWOODS VI HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 16, 2013**  
**Secretary of State**  
**CC5664670369**

**Current Principal Place of Business:**

12369 WOODROSE COURT  
#5  
FORT MYERS, FL 33907

**Current Mailing Address:**

12369 WOODROSE COURT  
#5  
FORT MYERS, FL 33907

**FEI Number: 59-2169940**

**Certificate of Status Desired: No**

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

WALLIS, BROOKE  
12369 WOODROSE CT  
#3  
FORT MYERS, FL 33907 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name WALLIS, BROOKE  
Address 12369-3 WOODROSE CT  
City-State-Zip: FORT MYERS FL 33907

Title DIR  
Name BERENS, MICHAEL  
Address 12337-3 WOODROSE CT  
City-State-Zip: FT MYERS FL 33907

Title SEC  
Name LINDQUIST, LORI  
Address 12361-2 WOODROSE CT  
City-State-Zip: FORT MYERS FL 33907

Title TREA  
Name DAMBROSE, ALBERT  
Address 12337-4 WOODROSE CT  
City-State-Zip: FORT MYERS FL 33907

Title VP  
Name SIMON, OLIVIA H  
Address 12341-3 WOODROSE CT  
City-State-Zip: FORT MYERS FL 33907

*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: ALBERT DAMBROSE**

**TREASURER**

**02/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date