

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002454

**FILED**  
**Feb 03, 2015**  
**Secretary of State**  
**CC2793103448**

**Entity Name:** FOGGY RIDGE COMMONS 6 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

24160 S.R. 54  
UNIT # 1  
LUTZ, FL 33559

**Current Mailing Address:**

24160 S.R. 54  
UNIT # 1  
LUTZ, FL 33559

**FEI Number: 20-5126023**

**Certificate of Status Desired: No**

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

LINER, FRANCIS MSR.  
24160 S.R. 54  
UNIT 1  
LUTZ, FL 33559 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 O  
Name LINER, FRANCIS MSR.  
Address 24160 S.R. 54 #1  
City-State-Zip: LUTZ FL 33559

Title D  
Name LINER, FRANCIS MJR.  
Address 24160 S.R. 54, #1  
City-State-Zip: LUTZ FL 33559

Title D  
Name LINER, MARY J  
Address 24160 S.R. 54 # 1  
City-State-Zip: LUTZ FL 33559

*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: FRANCIS LINER MSR**

**OFFICER**

**02/03/2015**

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

\_\_\_\_\_  
Date