

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43594

Entity Name: PARKWOOD VI ASSOCIATION INC.**Current Principal Place of Business:**6675 NW 42 TERRACE
COCONUT CREEK, FL 33073**Current Mailing Address:**PO BOX 970344
COCONUT CREEK, FL 33097 US**FEI Number:** 65-0277623**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTIN, CECILIA M
6675 NW 42 TERRACE
COCONUT CREEK, FL 33073 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:** CECILIA M MARTIN

03/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	HOLMES, DERRICK D
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	DS
Name	RITCHIE, MARIE ELENA
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	VP
Name	HARE, JAMES
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	ARCHITECHTURAL
Name	LEON, PEDRO A
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	DT
Name	MARTIN, CECILIA M
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	ARCHITECTURAL
Name	PERMISSION, JAMES
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

Title	MEMBER
Name	DINEEN, HEIDI
Address	PO BOX 970344
City-State-Zip:	COCONUT CREEK FL 33097

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: DERRICK D HOLMES

PRESIDENT

03/10/2020

Electronic Signature of Signing Officer/Director Detail

Date