2000 UNIFORM BUSINE'SS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # 735111 1. Entity Name VILLAS OF PEMBROKE LAKES ASSOCIATION, INC. 03-20-2000 90079 035 \*\*\*\*61.25 Principal Place of Business Mailing Address 10250 GREENHOUSE ROAD 10250 GREENHOUSE ROAD PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026-3208 02000 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1669331 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) EBER, ROBERT C 10761 SW 104TH STREET **MIAMI FL 33176** City Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change Addition TITLE ☐ Delete TITLE Lydzinski. Robert NAME NAME STREET ADDRESS STREET ADDRESS 1451 LAGUNA LANE CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL VPD ☐ Delete Change ☐ Addition TITLE **NETTER, CHERI** NAME NAME STREET ADDRESS STREET ADDRESS 10340 FAIRWAY ROAD CITY-ST-ZIP CITY-ST-7IP HOLLYWOOD FL 33026 Change ☐ Delete\_ ☐ Addition SD TITLE TITLE SIMMONS, GEORGE 1574 FAIRWAY RD. SIMMONS, GEORGE NAME NAME STREET ADDRESS STREET ADDRESS 1574 FAIRWAY ROAD PEMBROKE PINES, FL. 33024 CITY - ST-ZIP CITY-ST-ZIE PEMBROKE PINES FL ☐ Change **Addition X** Delete TITLE TITLE MIKE WERT, MIKE NAME REED. STAN NAME 1401 TRELLIS LANG STREET ADDRESS STREET ADDRESS 1700 NW 106 AVE CITY-ST-ZIP PEMOROKE PINES, FL. 33024 CITY-ST-ZIP PEMBROKE PINES FL Change ☐ Addition ☐ Delete TITLE O'CONNOR, THOMAS J NAME NAME STREET ADDRESS 10350 FAIRWAY ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33026 Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEDRGE MESIM NOW, S. Charge M. Alim mons
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/00

954-432-5709