\searrow 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an

SIGNATURE:

Feb 28, 2005 8:00 am Secretary of State **DOCUMENT # 735111** 02-28-2005 90228 017 ****61.25 VILLAS OF PEMBROKE LAKES ASSOCIATION, INC. Principal Place of Business Mailing Address 10250 GREENHOUSE ROAD the statement of the same 10250 GREENHOUSE ROAD 新沙糖 经设备 排入表面成功 PEMBROKE PINES, FL 33026 US PEMBROKE PINES, FL 33026 US 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. -Suite, Apt. #, etc. 01252005 Chg-NP CR2E037 (10/03) City & State 4. FEI Number NOT APPLICABLE Applied For City & State Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HYMAN & KAPLAN, GANGUZZA ET.AL Street Address (P.O. Box Number is Not Acceptable) 150 W FLAGLER ST **SUITE 2701** MIAMI, FL 33026 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. I am familiar with, and accept 等型4.14.数据数据自己(Mill) SIGNATURE (NOTE: Registered Agent signature required when reinstating) OATE! 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Delete TITLE ☐ Change ☐ Addition LYDZINSKI, ROBERT NAME NAME 1451 LAGUNA LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL CITY-ST-ZIP VΡ Change TITLE ☐ Defete TITLE ☐ Addition Reed, stan REED, STAN NAME 1700 NW 106 AU NAME 1700 NW 106 AVENUE STREET ADDRESS STREET ADDRESS pembroke pines, FL 33026 PEMBROKE PINES, FL 33026 CITY-ST-ZIP CITY-ST-7IP ☐ Change me ☐ Delete TILE ☐ Addition WERT, MIKE NAME NAME 1401 TRELLIS LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINESS, FL 33026 CITY-ST-ZIP masie 110, pete 9000 NW 43+ ☐ Delete Change ☐ Addition MASIFILO PETE MAME NAME STREET ADDRESS 1520 HAMMOCK LANE STREET ADDRESS Pembroke pinos, Fl 33024 CITY-ST-ZIP PEMBROKE PINES, FL 33026 CITY-ST-ZIP Quiros, Lazaro, 1558 Fairway N. Change ☐ Delete TITLE ☐ Addition TILE QUIROS, LAZARO NAME 1558 FAIRWAY RD. STREET ADDRESS STREET ADDRESS pembroke pinos, FL 33026 CITY-ST-ZIP PEMBROKE PINES, FL 33026 CITY-ST-ZIP TAVSS IJAMES 1051 Palmetto LA Change ☐ Addition ☐ Delete TAIRSS, JAMES NAME MAME 1651 PALMETTO RD. STREET ADDRESS STREET ADDRESS pembroke Pines, FL 33026 PEMBROKE PINES, FL. 33026 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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

FILED

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 735111 1. Entity Name VILLAS OF PEMBROKE LAKES ASSOCIATION, INC.						ATTACHMEN			
10250 GREENHOUSE ROAD 10			Mailing Address 10250 GREENHOUSE ROAD PEMBROKE PINES, FL 33026		US		5002	028	4
2. Principal Place of Business			3. Mailing Address			7			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02202005	Chg-NP CR2E	037 (10/03)	
City & State			City & State			4. FEI Number NOT APP	LICABLE		Applicable
Zip	Zip Country		Zip Count		ntry	5. Certificate of Status Desired			
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
HYMAN & KAPLAN, GANGUZZA ET.AL 150 W FLAGLER ST SUITE 2701					Name Street Address (P.O. Box Number is Not Acceptable)				
MIAMI, FL	33026				City	r₁ I Zip Code			
0.75		- h - '' - h ''	4				F	<u> </u>	
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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
Signisture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signeture required when reinstating) DATE									
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaig Trust Fund Contr						\$5.00 May Be Added to Fees		eck payable to artment of St	
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