

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2006
Secretary of State**

DOCUMENT# N95000005217

Entity Name: NORMANDY AT PEMBROKE LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10060 NW 20 ST
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

C/O ATLANTIS MANAGEMENT
11011 SHERIDAN ST., #208
COOPER CITY, FL 33026 US

New Mailing Address:

FEI Number: 65-0641586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISINGER, DENNIS J ESQ.
4000 HOLLYWOOD BLVD.
#265S
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ENTINGER, DAVID
Address: 1875 NW 100 WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: SD () Delete
Name: MENDEZ, SARDIS
Address: 1946 NW 99 CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TD () Delete
Name: ROTGER, CARMEN
Address: 9966 NW 18 ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VASQUEZ, JESSE
Address: 1900 NW 98 AVE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD () Change (X) Addition
Name: KHOURI, MARLENE
Address: 1945 NW 99 CIR
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Change (X) Addition
Name: CAPUANO, KIMBERLEE
Address: 1960 NW 100 AVE
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARMEN ROTGER

TD

04/24/2006

Electronic Signature of Signing Officer or Director

Date