

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005217

FILED  
Jun 30, 2008  
Secretary of State

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

**Current Principal Place of Business:**

C/O PROGRESSIVE MANAGEMENT ASSOCIATES, INC  
5400 S UNIVERSITY DRIVE, SUITE 101  
DAVIE, FL 33328 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PROGRESSIVE MANAGEMENT ASSOCIATES, INC  
5400 S UNIVERSITY DRIVE, SUITE 101  
DAVIE, FL 33328 US

**New Mailing Address:**

FEI Number: 65-0641586      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

EISENGER, BROWN, LOUIS & FRANKEL, PA  
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: VASQUEZ, JESUS  
Address: 5400 S UNIVERSITY DRIVE, SUITE 101  
City-St-Zip: DAVIE, FL 33328

Title: SD ( ) Delete  
Name: MENDEZ, SARDIS  
Address: 5400 S UNIVERSITY DRIVE, SUITE 101  
City-St-Zip: DAVIE, FL 33328

Title: TD ( ) Delete  
Name: DEYOUNG, KIMBERLY  
Address: 5400 S UNIVERSITY DRIVE  
City-St-Zip: DAVIE, FL 33328

Title: VPD ( ) Delete  
Name: KHOURI, MARLENE  
Address: 5400 S UNIVERSITY DRIVE, SUITE 101  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: MUNDY, GAWAIN  
Address: 5400 S UNIVERSITY DRIVE, SUITE 101  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: EDWARDS, KHARI  
Address: 5400 S UNIVERSITY DRIVE, SUITE 101  
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify 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: JESUS VASQUEZ

PD

06/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date