FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

(7)

PEMBROOKE HOMEOWNERS ASSOCIATION, INC.

N27771

PEMBROOKE HOMEOWNERS ASSOCIATION, INC.										
Principal Place o	f Business	Mailing Address				i iddillat gia tibe take sagu sagu				
•	_	2180 W. STATE ROAD	434							
2180 W. STATE ROAD 434 SUITE 5000		SUITE 5000								
LONGWOOD FL 32779		LONGWOOD FL 32779			3. Date Incorporated or Qualified					
						08/05/1988		05/01/19		
2 Principal Plac	re of Rusiness	2a. Mailing Address			4. FEI Number			polied For		
Principal Place of Business		26			59-3014019	Not Applicable \$8.75 Additional				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired		
22		27								
City & State		City & State			6. Election Campaign Financing		T	May Be to Fees		
23		28			Trust Fund Contribution	ntancible				
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	25	29	30			10. Name and Address of New Ro				
	9. Name and Address of Curre	nt Registered Agent		81	Name					
:			Ì			D Al I blob Accorded	(a)			
	AMES W. JR.		ļ	82	Street Ac	dress (P.O. Box Number is Not Acceptable	ie)		1	
	MANAGEMENT, INC.			83						
2180 WE	ST S.R. 434, SUITE 5000			00						
LONGWO	OOD FL 32779			64	City		F	85 Zip	Code	
•		10-3 4500 Date City	tan the che		named corr	poration submits this statement for the pur pard of directors. I hereby accept the appo		phonoina ite re	gistered office	
				corp	oration's b	poration submits this statement for the pur pard of directors. I hereby accept the appo	pintment	as registered a	agent. I am	
familiar wit	h, and accept the obligations of, Sec	ction 617.0503, Florida Statute	es.							
CICLIATUDE				(A.sc	ot signature root	ured when reinstaling)	DATE			
	Signature, typed or printed name of registered age	ent and title if applicable [P	NOTE Registered	, muje	i, signature rest	ADDITIONS/CHANGES TO OFF	ICERS A	ND DIRECTOR	RS IN 12	
12.				ITLE		TD		Change	X Addition	
TITLE	P		1.2 N		ł	DENOMME, STEVE			Ï	
NAME	BROWN, WILLIAM		1.35		I ADORESS	2613 RANGELEY COURT				
STREET ADDRESS	7223 JAFFERY CT.				ST-ZIP	ORLANDO, FL 32835				
CITY-ST-ZIP	ORLANDO FL	K]DELETE	211		51 24	SD		☐ Change	Addition	
TITLE	VD	4100000	221		Ì	RODRIQUEZ, ELAINE				
NAME	ROBINSON, LOUISE				T ADDRESS	7211 JARFERY DR				
STREET ADDRESS	7321 HUNTERDON CT				-ST-ZIP	ORLANDO, FL 32835				
CITY-ST-ZIP	ORLANDO FL	DELETE		TLE		VD VD		Change	☐ Addition	
TITLE	T TOTAL			NAME						
NAME	RUSSELL, ROBERT				E1 ADDRESS					
STREET ADDRESS	7316 LISMORE CT.				-ST-ZIP					
CITY - ST - ZIP	ORLANDO FL	DELETE		TITLE		PD		K AChange	☐ Addition	
TITLE	SD SECTION		1	NAM	I					
NAME	FORREST, JEFFREY				ET ADDRESS					
STREET ADDRESS	2700 GRANTHAM CT				- SI - ZIP	_				
CITY-ST-ZIP	ORLANDO FL	K] D€LETE		TITLE				☐ Change	☐ Addition	
TITLE	D DICHARD	•		NAMI	Į.					
NAME	SMALLEY, RICHARD				E1 ADORESS					
STREET ADDRESS	2927 BARRYMORE CT				-ST-ZIP					
CITY - ST - ZIP	ORLANDO FL	∑ }DELETE		TITLE				Change	Addition	
TITLE	D TENDO	A. Section	1	NAM						
NAME	HUNIAS, IERRI				ET ADDRESS					
I OFFICE ADDRESS	OZOG CHANNINGANI I					1				

SIGNATURE:

2705 GRANTHAM CT.

STREET ADDRESS

CHATCHE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

64.0TY-ST-ZIP

ORLANDO FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 13 if changed, or on an attachment with an address. 291-9144 Daytime Priorie #