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May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N27771 (7)
1. Corporation Name
PEMBROOKE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 2180 W. STATE ROAD 434 SUITE 5000 LONGWOOD FL 32779	Mailing Address 2180 W. STATE ROAD 434 SUITE 5000 LONGWOOD FL 32779-5044
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	3. Date Incorporated or Qualified 08/05/1988	3a. Date of Last Report 05/01/1996	4. FEI Number 59-3014019	Applied For Not Applicable
		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent HART, JAMES W. JR. SENTRY MANAGEMENT, INC. 2180 WEST S.R. 434, SUITE 5000 LONGWOOD FL 32779	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	VD
NAME	DENOMME, STEVE	1.2 NAME	LEWIS, PATRICIA
STREET ADDRESS	26113 RANGELEY COURT	1.3 STREET ADDRESS	7174 SOMERSWORTH DR
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE	SD	2.1 TITLE	PD
NAME	RODRIGUEZ, ELAINE	2.2 NAME	DENOMME, STEVE
STREET ADDRESS	7211 JAFFREY DR	2.3 STREET ADDRESS	2613 RANGELEY CT
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE	VD	3.1 TITLE	D
NAME	RUSSELL, ROBERT	3.2 NAME	RUSSELL, BOB
STREET ADDRESS	7316 LISMORE CT.	3.3 STREET ADDRESS	7316 LISMORE CT
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE	PD	4.1 TITLE	SD
NAME	FORREST, JEFFREY	4.2 NAME	CANNING, LONA
STREET ADDRESS	2700 GRANTHAM CT	4.3 STREET ADDRESS	2609 GILSON CT
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE		5.1 TITLE	TD
NAME		5.2 NAME	THOMPSON, ROB
STREET ADDRESS		5.3 STREET ADDRESS	2603 GILSON CT
CITY-ST-ZIP		5.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE		6.1 TITLE	D
NAME		6.2 NAME	GARRET, HUNTER
STREET ADDRESS		6.3 STREET ADDRESS	7208 SOMERSWORTH DR
CITY-ST-ZIP		6.4 CITY-ST-ZIP	ORLANDO FL 32835

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: _____ 3/27/97 422-3171

CR2E037 (9/96)

PEMBROOK HOMEOWNERS ASSOCIATION, INC.
1997 ADDITIONAL OFFICERS AND DIRECTORS

7.1	TITLE	D
7.2	NAME	MONTGOMERY, TOM
7.3	STREET ADDRESS	2912 LANGLEY RD
7.4	CITY- ST- ZIP	ORLANDO FL 32835

8.1	TITLE	
8.2	NAME	
8.3	STREET ADDRESS	
8.4	CITY-ST-ZIP	

9.1	TITLE	
9.2	NAME	
9.4	STREET ADDRESS	
9.4	CITY-ST- ZIP	

10.1	TITLE	
10.2	NAME	
10.3	STREET ADDRESS	
10.4	CITY-ST- ZIP	