

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N98000005031

1. Corporation Name

PEMBROKE FALLS PHASE FOUR-A HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

123 NW 13TH STREET #300  
BOCA RATON FL 33432

Mailing Address

123 NW 13TH STREET #300  
BOCA RATON FL 33432



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		09/01/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0895087	
City & State		City & State		5. Certificate of Status Desired <b>XX</b>	
23		28		<b>\$8.75</b> Additional Fee Required	
Zip		Country		6. Election Campaign Financing	
24		29		Trust Fund Contribution <input type="checkbox"/>	
		30		<b>\$5.00</b> May Be Added to Fees	

9. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.  
3111 STIRLING ROAD  
FORT LAUDERDALE FL 33312

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	
NAME	RIZZO, DOMENIC	12 NAME	
STREET ADDRESS	123 NW 13TH STREET #300	13 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	
NAME	GAUDET, LYNNE	22 NAME	
STREET ADDRESS	123 NW 13TH STREET #300	23 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432	24 CITY-ST-ZIP	
TITLE	VSTD	31 TITLE	
NAME	ENGELSTEIN, HARRY	32 NAME	
STREET ADDRESS	123 NW 13TH STREET #300	33 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LYNNE GAUDET  
Vice President

561-391-4012

Date

Daytime Phone #

0043797

CR2E037 (11/98)