

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27771

1. Entity Name

PEMBROOKE HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90067 023 ****61.25

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 32779-5042

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3014019

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

HART, JAMES W. JR.
SENTRY MANAGEMENT, INC.
2180 WEST S.R. 434, SUITE 5000
LONGWOOD FL 32779

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
SD	ROBINSON, JOE	7317 LISMORE CT	ORLANDO FL 32835	<input checked="" type="checkbox"/>
TD	DENOMME, STEVE	2613 RANGELEY CT	ORLANDO FL	<input checked="" type="checkbox"/>
V	RUSSELL, BOB	7316 LISMORE CT	ORLANDO FL	<input type="checkbox"/>
PD	ROBINSON, LOUISE	7321 HUNTERDON CT	ORLANDO FL 32835	<input checked="" type="checkbox"/>
DD	NELSON, EMILY	2721 JAFFERY DR	ORLANDO FL 32835	<input checked="" type="checkbox"/>
D	GARRET, HUNTER	7208 SOMERSWORTH DR	ORLANDO FL	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
D	ONDERICK, BILL	7248 HUNTERDON CT	ORLANDO, FL 32835	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PD	LEWIS, TRICIA	7174 SOMERSWORTH CT	ORLANDO, FL 32835	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VD		ORLANDO, FL 32835		<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	GRUENTHAL, JULIE	2661 RANGELEY CT	ORLANDO FL 32835	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TD	RODRIGUEZ, ELAINE	7211 JAFFREY CT	ORLANDO, FL 32835	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	RABY, DAVID L	2718 GRETAGREEN CT	ORLANDO, FL 32835	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Tricia Lewis 2/9/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (9/99)

Attachment
D# N8771
D0021928

D
SHOWEN, DALILA
2723 GRANTHAM CT
ORLANDO FL 32835-6150

ADDITION