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SECRETARY OF STATE. TALEANASSEE. FLORIDA

BOCA RATON, FLORIDA 33432				A RATON	FI	FL 3 <sup>2</sup> / <sub>3</sub> <sup>2</sup> / <sub>2</sub> <sup>2</sup>					
8. The above	named entity submits this statement for the purpos	e of changing its regi			, in the state of Florida.						
SIGNATURE .	beauty.	David Sh	apiro.								
0.	Signature, typed or printed name of registered agent and title if applica	ble (NOTE, Reg	istered Agent signat	ure required when reinstating)	DATE						
		ection Campaign Fina ust Fund Contribution		\$5.00 May Be Added to Fees	Make Check Departmer						
	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHA	NGES TO OFFICERS AND D	IRECTORS IN	10				
NAME STREET ADDRESS CITY-ST-ZIP	DP RIZZO, DOMENIC 123 NW 13TH ST. #300 BOCA RATON, FL 33432	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAUDET, LYNNE 123 NW 13TH ST. #300 BOCA RATON, FL 33432	□ Delete		DV GAUDET. LYN 123 NW 13TH BOCA RATON,	ST. #300	XX Change	Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGELSTEIN HARRY 123 NW 137H ST 3 3 3 9 9	☐ Delete	NAME STREET ADDRESS	DST ENGELSTEIN, 123 NW 13TH BOCA RATON,	HARRY	XX Change	Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOOK RITON, PB 33432	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	20	00003357 -08/15/00( ******61.25	□ Change '962- 010610 ******					
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CITY-ST-ZIP			CITY-ST-ZIP			1 m					
12. 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: Lynne Gaudet, Vice President											

2000 UNIFORM BUSINESS REPORT (UBR) "AMENDED"

Mailing Address

3. Mailing Address

SUITE 300

Zip

33432

City & State

BOCÁ RATON,

123 NW 13TH ST. Suite, Apt. #, etc.

C/O GLEN MANAGEMENT

P.O. BOX 1390 BOCA RATON, FL

FL

Country

Palm Beach

33429-1390

N95000000650

PEMBROKE FALLS HOMEOWNERS ASSOCIATION, INC.

DCCUMENT #

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SUITE 300

City & State BOCA RATON,

Zip

33432

123 NW 13TH ST.

C/O GLEN MANAGEMENT

BOCA RATON, FL 33432

301 W. CAMINO GARDENS BLVD.

Country

GLEN MANAGEMENT SERVICES, INC.

ANDREW C. LGLEN., CATALOGO.

Palm Beach

6. Name and Address of Current Registered Agent

301 W. CAMINO GARDENS BLVD. SUITE 800

1. Entity Name