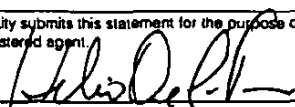
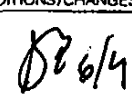
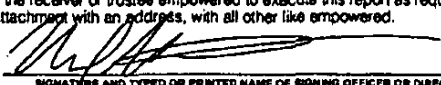


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

07 MAY 23 PM 3: 31

CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000005031			
1. Entity Name PEMBROKE FALLS PHASE FOUR-A HOMEOWNER'S ASSOCIATION, INC.			
Principal Place of Business 1651 NW 136TH AVE PEMBROKE PINES, FL 33028		Mailing Address C/O CASTLE GROUP P O BOX 559009 FORT LAUDERDALE, FL 33355	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FEI Number 65-0895087	
Applied For		Not Applicable	
6. Name and Address of Current Registered Agent CASTLE MANAGEMENT, INC. 12270 SW 3RD ST FORT LAUDERDALE, FL 33325		7. Name and Address of New Registered Agent Name SKRLD, INC. Street Address (P.O. Box Number is Not Acceptable) 201 ALHAMBRA CIRCLE, STE 1102 City CORAL GABLES FL Zip Code 33134	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 5-21-07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRAUTMAN, MICHAEL 13781 NW 21ST ST. PEMBROKE PINES, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HASKIN, GREG 2172 NW 139 TERRACE PEMBROKE PINES, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON, ALDO 1822 NW 141ST AVE PEMBROKE PINES, FL 33028 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUZZO, CLIFF 2053 NW 141ST AVE PEMBROKE PINES, FL 33028 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KLEIN, MARNIE 1810 NW 141 AVENUE PEMBROKE PINES, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSCOZO, HERNANDO 1847 NW 140TH TERR HOLLYWOOD, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		DATE 4-30-07 DAYTIME PHONE # 954-437-2378	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE DAYTIME PHONE #	