## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N27771**

## PEMBROOKE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 2180 W. STATE ROAD 434 SUITE 5000 LONGWOOD FL 32779

City & State

HART, JAMES W. JR.

LONGWOOD FL 32779

SENTRY MANAGEMENT, INC. 2180 WEST S.R. 434, SUITE 5000

Zip

Mailing Address

2180 W. STATE ROAD 434 SUITE 5000

LONGWOOD FL 32779

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

6. Name and Address of Current Registered Agent

Country

City & State Zip Country

4. FEI Number 59-3014019

\$8.75 Additional 5. Certificate of Status Desired П Fee Required

FILED

04-28-2003 90219 047 \*\*\*\*61.25

☐ CHECK HERE IF MAKING CHANGES

7. Name and Address of New Registered Agent

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

City

Zip Code

Applied For Not Applicable

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

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 Florida Department of State

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE Addition X Delete Change ROBINSON, LOUISE REBARCHAK, BERNIE NAME NAME STREET ADDRESS 7321 HUNTERDON CT. STREET ADDRESS 2912 LANGELEY PK CT CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32835 ORLANDO FL 32835 ☐ Change Addition TITLE TITLE ✓ Delete MERLET, PATRICK ABREU JOLIE NAME NAME STREET ADDRESS 2904 LANGLEY PARK STREET ADDRESS 2824 RIPTON CT ORLANDO FL CITY-ST-ZIP ORLANDO FL 32835 CITY-ST-7IP 32835 TITLE Delete TITLE Change Addition RUSSELL, BOB RODRIGUEZ. ELAINE NAME NAME 7211 JAFFERY CT 7316 LISMORE CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-7IP ORLANDO FL 32835 Change TITLE ☐ Delete TITLE ☐ Addition DELIO, AL NAME DELIO- AL NAME 2668 RANGLEY COURT STREET ADDRESS STREET ADDRESS 2668 RANGELEY CT ORLANDO FL 32835 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32835 Addition Delete ☐ Change TITLE TITLE BAHAMONDE, VICTOR SHOWEN. DALILA NAMÉ 2916 BARRYMORE CT. STREET ADDRESS STREET ADDRESS 2723 GRANTHAM CT CITY-ST-ZIP ORLANDO FL 32835 CITY-ST-ZIP ORLANDO FL D Change TITLE Delete TITLE X Addition CONNOR, ANNA LEWIS, TRISH NAME 7174 SOMERSWORTH DR STREET ADDRESS 7324 LISMORE CT. STREET ADDRESS CITY-ST-ZIP ORLANDO FL -32835 ORLANDO FL 32835

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**