

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23478

Entity Name: PEMBRIDGE E CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O OXFORD ASSOCIATION MANAGEMENT
2950 NW COMMERCE PARK DRIVE SUITE 3
BOYNTON BEACH, FL 33426**Current Mailing Address:**C/O OXFORD ASSOCIATION MANAGEMENT
2950 NW COMMERCE PARK DRIVE SUITE 3
BOYNTON BEACH, FL 33426 US**FEI Number:** 65-0025458**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BACKER, KEITH F ESQ.
BACKER LAW FIRM
400 SOUTH DIXIE HWY, SUITE 420
BOCA RATON, FL 33432 US*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:** KEITH F BACKER

02/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	HENDLER, GILBERT
Address	15450 PEMBRIDGE AVE #162
City-State-Zip:	DELRAY BEACH FL 33484

Title	VP
Name	LUCON, ANN
Address	15450 PEMBRIDGE AVE #180
City-State-Zip:	DELRAY BEACH FL 33484

Title	TREASURER
Name	WALTERS, ANGELINA
Address	15450 PEMBRIDGE AVE # 189
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	KATZ, JERRY
Address	15450 PEMBRIDGE AVENUE # 166
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	KERNESS, MELVIN
Address	15450 PEMBRIDGE AVENUE # 163
City-State-Zip:	DELRAY BEACH FL 33484

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GILBERT HENDLER

PRESIDENT

02/25/2021

Electronic Signature of Signing Officer/Director Detail

Date