

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000046

Entity Name: PEMBROKE SHORES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

13794 NW 4TH ST., #208
SUNRISE, FL 33325

Current Mailing Address:

13794 NW 4TH ST., #208
SUNRISE, FL 33325 US

FEI Number: 65-0620913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, PA
2149 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name TURNER, HARRY
Address 113794 NW 4TH STREET
SUITE 208
City-State-Zip: SUNRISE FL 33325

Title DIRECTOR
Name PITHEY, NIALL
Address 13794 NW 4TH STREET
SUITE 208
City-State-Zip: SUNRISE FL 33325

Title PRESIDENT
Name DIAZ, ALBERTO
Address 13794 NW 4TH STREET
SUITE 208
City-State-Zip: SUNRISE FL 33325

Title VP, TREASURER
Name RODRIGUEZ-SOTO, ISRAEL
Address 13794 NW 4TH STREET
SUITE 208
City-State-Zip: SUNRISE FL 33325

Title SECRETARY
Name CONLAN, KEITH
Address 13794 NW 4TH STREET
208
City-State-Zip: SUNRISE FL 33325

Title DIRECTOR
Name FRAZIER, KEN
Address 13794 NW 4TH STREET
208
City-State-Zip: SUNRISE FL 33325

Title DIRECTOR
Name PEREZ, AGNIEZKA
Address 13794 NW 4TH STREET
208
City-State-Zip: SUNRISE FL 33325

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: ALBERTO DIAZ

PRESIDENT

02/17/2017

Electronic Signature of Signing Officer/Director Detail

Date