

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000000046

**FILED**  
**Mar 14, 2018**  
**Secretary of State**  
**CC3558115782**

**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**

**03/14/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date