

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000000650

Entity Name: PEMBROKE FALLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1651 N.W. 136TH AVENUE
PEMBROKE PINES, FL 33028

Current Mailing Address:

C/O CASTLE MANAGEMENT
12270 SW 3RD STREET SUITE 200
PLANTATION, FL 33325 US

FEI Number: 65-0696334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, LERNER, DE LA TORRE, MARS & SOBE, P.A.
201 ALHAMBRA CIRCLE, 11TH FLOOR
CORAL GABLES, FL 33134 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: SIEGFRIED RIVERA

07/08/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, PHASE 1 REPRESENTATIVE
Name TADROS , MICHAEL
Address 1651 NW 136TH AVE
City-State-Zip: PEMBROKE PINES FL 33028

Title TREASURER, PHASE 5A REPRESENTATIVE
Name HARGIS, LARRY
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, PHASE 2 REPRESENTATIVE
Name MCDONALD, ROY
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, PHASE 5 REPRESENTATIVE
Name PATTERSON, SCOTT
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title VP, PHASE 6 REPRESENTATIVE
Name ROBBINS, JR
Address 1651 NW 136TH AVE
City-State-Zip: PEMBROKE PINES FL 33026

Title SECRETARY
Name MASTERS, LORIE
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR
Name HUS, GADI
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, PHASE 4 REPRESENTATIVE
Name DEIDAN, CECILIA
Address 1651 NW 136 AVENUE.
City-State-Zip: PEMBROKE PINES FL 33028

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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: MICHAEL TADROS

PRESIDENT

07/08/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, PHASE 7 REPRESENTATIVE
Name HYATT, ED
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR
Name FERNANDEZ, MIGUEL
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, PHASE 4A
 REPRESENTATIVE
Name VOLKERS, SCOTT
Address 1651 NW 136 AVENUE
City-State-Zip: PEMBROKE PINES FL 33028