2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000000650

Entity Name: PEMBROKE FALLS HOMEOWNERS ASSOCIATION, INC.

FILED Sep 29, 2014 Secretary of State CC5784904734

Current Principal Place of Business:

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

Current Mailing Address:

C/O CASTLE MANAGEMENT PO BOX 559009 FORT LAUDERDALE, FL 33355

FEI Number: 65-0696334 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, LERNER, DE LA TORRE, MARS & SOBEL, 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: STEVEN SIEGFRIED

09/29/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Address

VΡ Title **PRESIDENT** Title

Name TADROS, MICHAEL Name ROBBINS, JR

Address 1651 NW 136TH AVE Address 1651 NW 136TH AVE

PEMBROKE PINES FL 33026 City-State-Zip: PEMBROKE PINES FL 33028 City-State-Zip:

Title **TREASURER** Title **SECRETARY** Name HARGIS, LARRY VOLKERS, SCOTT Name

Address 1651 NW 136TH AVENUE Address 14041 NW 19TH ST

City-State-Zip: PEMBROKE PINES FL 33026 City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR, PHASE 5A Title **DIRECTOR**

REPRESENTATIVE FERNANDEZ. MIGUEL

Name HARGIS, LARRY Name

1651 NW 136TH AVE Address 13712 NW 11 COURT

City-State-Zip: PEMBROKE PINES FL 33026 City-State-Zip: PEMBROKE PINES FL 33028

DIRECTOR, PHASE 5 Title Title DIRECTOR, PHASE 4

REPRESENTATIVE REPRESENTATIVE

Name PATTERSON, SCOTT Name DEIDAN, CECILIA 1092 NW 139 TERRACE Address Address 13715 NW 18 ST

City-State-Zip: PEMBROKE FALLS FL 33028 City-State-Zip: PEMBROKE FALLS 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.

PRESIDENT 09/29/2014 SIGNATURE: MICHAEL TADROS

Officer/Director Detail Continued:

Name

Title DIRECTOR, PHASE 1 REPRESENTATIVE Title DIRECTOR, PHASE 7 REPRESENTATIVE

TADROS, MIKE

Name HYATT, ED 12838 NW 23RD STREET Address

Address 14284 NW 18 MANOR City-State-Zip: PEMBROKE FALLS FL 33028 City-State-Zip: PEMBROKE FALLS FL 33028

Title DIRECTOR, PHASE 6 REPRESENTATIVE

ROBBINS, J.R Name

Address 1232 NW 143 AVENUE

City-State-Zip: PEMBROKE FALLS FL 33028

Title DIRECTOR

Name ABRAMS, LITZBETH

Address 1651 NW 136TH AVE

City-State-Zip: PEMBROKE PINES FL 33028