

**2016 FLORIDA NOT FOR PROFIT CORPORATION 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

04/28/2016

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 SALAS, EMERICK  
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

**Continues on page 2**

*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

04/28/2016

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               FISHMAN , SYLVIA  
Address            1651 NW 136 AVENUE  
City-State-Zip:   PEMBROKE PINES FL 33028