

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000005031

**Entity Name:** PEMBROKE FALLS PHASE FOUR-A HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1651 NW 136TH AVE  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

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

**FEI Number: 65-0895087**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BOARD OF DIRECTORS  
1651 NW 136TH AVENUE  
PEMBROKE PINES, FL 33028 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 SD  
Name ESTHER, SYGER  
Address 2024 NW 139TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33028

Title TD  
Name MOSCOSO, HERNAN  
Address 1847 NW 140 TERRACE  
City-State-Zip: PEMBROKE PINES FL 33028

Title VP  
Name EDWARD, O'BRIEN  
Address 2027 NW 139TH AVENUE  
City-State-Zip: PEMBROKE PINES FL 33028

Title P  
Name SYLVIA, FISHMAN  
Address 1875 NW 139TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33028

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: SYLVIA FISHMAN**

**PRESIDENT**

**04/12/2013**

Electronic Signature of Signing Officer/Director Detail

Date