

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27771

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** PEMBROOKE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PREMIER COMMUNITY MANAGERS INC.  
5151 ADANSON ST, SUITE 103  
ORLANDO, FL 32804

**New Principal Place of Business:**

PREMIER COMMUNITY MANAGERS INC.  
5151 ADANSON ST, SUITE 103  
ORLANDO, FL 32804 US

**Current Mailing Address:**

PREMIER COMMUNITY MANAGERS INC.  
5151 ADANSON ST, SUITE 103  
ORLANDO, FL 32804

**New Mailing Address:**

PREMIER COMMUNITY MANAGERS INC.  
5151 ADANSON ST, SUITE 103  
ORLANDO, FL 32804 US

**FEI Number:** 59-3014019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOUSE, GARY  
PREMIER COMMUNITY MANAGERS INC.  
5151 ADANSON ST, SUITE 103  
ORLANDO, FL 32804 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ANDERSON, JOHN  
Address: 2610 TILTON CT  
City-St-Zip: ORLANDO, FL 32835 US

Title: VP  
Name: ECKOFF, TRISHA A  
Address: 2636 CLEMENTON PARK CT  
City-St-Zip: ORLANDO, FL 32835 US

Title: T  
Name: DELIO, AL  
Address: 2668 RANGELEY CT  
City-St-Zip: ORLANDO, FL 32835 US

Title: S  
Name: RODRIGUEZ, DANIEL  
Address: 7211 JAFFERY CT  
City-St-Zip: ORLANDO, FL 32835 US

Title: D  
Name: MCILRATH, JAMES  
Address: 7218 JAFFERY CT  
City-St-Zip: ORLANDO, FL 32835 US

Title: D  
Name: ANDERSON, GAIL  
Address: 2610 TILTON CT  
City-St-Zip: ORLANDO, FL 32835 US

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: JOHN ANDERSON

P

03/10/2011

Electronic Signature of Signing Officer or Director

Date