

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000204

FILED
Apr 30, 2010
Secretary of State

Entity Name: PEMBROKE FALLS PHASE TWO HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1651 NW 136TH AVE
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 65-0780235 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MANAGEMENT AGENT
1651 NW 136TH AVENUE
PEMBROKE PINES, FL 33028 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: VPD
Name: JARDON, MARIO
Address: 13229 NW 16 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: PD
Name: SCJARRETTI, TERRI
Address: 1542 NW 133 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: TD
Name: PEREZ, CHRISTY
Address: 1452 NW 132ND AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD
Name: HELMSORIG, DENISE
Address: 13359 NW 16 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D
Name: WILLARD, GARY
Address: 13315 NW 13TH STREET
City-St-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: ROBERT A. DONNELLY

MGR

04/30/2010

Electronic Signature of Signing Officer or Director

Date