

2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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
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

06/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SCIARRETTI, TERRI
Address 1542 NW 133 AVE
City-State-Zip: PEMBROKE PINES FL 33028

Title VP
Name FISHMAN, SYLVIA
Address 1875 NW 139 TERRACE
City-State-Zip: PEMBROKE PINES FL 33026

Title SECRETARY
Name VOLKERS, SCOTT
Address 14041 NW 19TH ST
City-State-Zip: PEMBROKE PINES FL 33026

Title TREASURER
Name ABRAHAMS, LITZBETH
Address 13162 NW 18 STREET
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR
Name MASON, PATRICK
Address 13185 NW 18TH COURT
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR, PHASE 5A
 REPRESENTATIVE
Name HARGIS, LARRY
Address 13712 NW 11 COURT
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR, PHASE 5
 REPRESENTATIVE
Name PATTERSON, SCOTT
Address 1092 NW 139 TERRACE
City-State-Zip: PEMBROKE FALLS FL 33028

Title DIRECTOR, PHASE 4
 REPRESENTATIVE
Name DEIDAN, CECILIA
Address 13715 NW 18 ST
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.

SIGNATURE: TERRI SCIARRETTI

PRESIDENT

06/09/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, PHASE 1 REPRESENTATIVE
Name TADROS , MIKE
Address 12838 NW 23RD STREET
City-State-Zip: PEMBROKE FALLS FL 33028

Title DIRECTOR, PHASE 6 REPRESENTATIVE
Name ROBBINS , J.R
Address 1232 NW 143 AVENUE
City-State-Zip: PEMBROKE FALLS FL 33028

Title DIRECTOR, PHASE 7 REPRESENTATIVE
Name HYATT, ED
Address 14284 NW 18 MANOR
City-State-Zip: PEMBROKE FALLS FL 33028