

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009144

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: SOMERSET AT ABACOA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2600 NORTH MILITARY TRAIL  
SUITE 100  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2600 NORTH MILITARY TRAIL  
SUITE 100  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 20-0934746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

INGLIS, STEVE  
1930 COMERCE LANE  
SUITE #1  
JUPITER, FL 33458 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 ( ) Delete  
Name: TAYLOR, BEN  
Address: 175 GALICIA WAY #102  
City-St-Zip: JUPITER, FL 33458

Title: VP ( ) Delete  
Name: SAMOULILDIS, KOSTA  
Address: 105 EGRET DRIVE  
City-St-Zip: JUPITER, FL 33458

Title: T ( ) Delete  
Name: BRINK, EILEEN M  
Address: 105 SANTIAGO DR #104  
City-St-Zip: JUIPTER, FL 33458

Title: S ( ) Delete  
Name: BRODIE, BARBARA  
Address: 175 GALICIA WAY  
City-St-Zip: JUPITER, FL 33458

Title: D ( ) Delete  
Name: MCEWEN, DAYTON  
Address: 145 GALICIA #201  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETH VOLLERO

CFO

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date