

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 27, 2009
Secretary of State**

DOCUMENT# N05000008873

Entity Name: SOMERSET OF LEE COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11691 GATEWAY BOULEVARD, SUITE 203
FT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

11691 GATEWAY BOULEVARD, SUITE 203
FT MYERS, FL 33913

New Mailing Address:

FEI Number: 20-5068052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

S & S GOLF MANAGEMENT, INC.
11691 GATEWAY BOULEVARD, SUITE 203
FT MYERS, FL 33913 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: PD () Delete
Name: CLARK, KEVIN
Address: 11691 GATEWAY BOULEVARD, SUITE 203
City-St-Zip: FORT MYERS, FL 33913

Title: VD () Delete
Name: BEULAH, ALAN
Address: 11691 GATEWAY BOULEVARD, SUITE 203
City-St-Zip: FT MYERS, FL 33913

Title: S/T () Delete
Name: HERMINA, MANNY
Address: 11691 GATEWAY BOULEVARD, SUITE 203
City-St-Zip: FT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S/T (X) Change () Addition
Name: SMITH, JERRY
Address: 11691 GATEWAY BOULEVARD, SUITE 203
City-St-Zip: FT MYERS, FL 33913

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: KEVIN CLARK

Electronic Signature of Signing Officer or Director

P

04/27/2009

Date