

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000651

FILED
Mar 31, 2009
Secretary of State

Entity Name: SOMERSET COVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD
CORAL SPRINGS, FL 33065

Current Mailing Address:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065

New Mailing Address:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065

FEI Number: 65-1024461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MANAGEMENT
11784 W. SAMPLE RD
#103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRYANT, LINDA
Address: 12902 SW 50 ST
City-St-Zip: MIRAMAR, FL 33027

Title: TD () Delete
Name: CHIRINO, JORGE
Address: 12925 SW 49 CT
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: PARKER, LUCIA M
Address: 12934 SW 49 CT
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: STEIN, MARTIN
Address: 12851 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

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: MARY LOU PALMER

AGT

03/31/2009

Electronic Signature of Signing Officer or Director

Date