

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742795

**Entity Name:** SOMERSET I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

184 SOMERSET I  
WPB, FL 33417

**FILED**  
**Apr 06, 2020**  
**Secretary of State**  
**6100320911CC**

**Current Mailing Address:**

SOMERSET I C/O SEACREST SERVICES INC  
2101 CENTREPARK W DR #110  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-1636187

**Certificate of Status Desired:** No

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

GOODMAN, AL  
174 SOMERSET I  
WEST PALM BEACH, FL 33417 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:** AL GOODMAN

04/06/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           ANDRADE, ROBERT  
Address        182 SOMERSET I  
City-State-Zip: WEST PALM BEACH FL 33417

Title           SECRETARY  
Name           DAVIS, KATHLEEN  
Address        181 SOMERSET I  
City-State-Zip: WEST PALM BEACH FL 33417

Title           VP  
Name           GOODMAN, AL  
Address        174 SOMERSET I  
City-State-Zip: WEST PALM BEACH FL 33417

Title           PRESIDENT  
Name           BYRON, JOHN  
Address        184 SOMERSET I  
City-State-Zip: WEST PALM BEACH FL 33417

Title           DIRECTOR  
Name           STEPPLER, ESTELLE  
Address        176 SOMERSET I  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** KATHLEEN DAVIS - GT

**SECRETARY**

04/06/2020

Electronic Signature of Signing Officer/Director Detail

Date