

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2003 8:00 am
Secretary of State

09-04-2003 90058 006 ****61.25

DOCUMENT # 728439

1. Entity Name

SOMERSET CONDOMINIUM NO. FIVE, INC.



Principal Place of Business

**2851 SOMERSET DR.
E-103
LAUDERDALE LAKES FL 33311**

Mailing Address

**2851 SOMERSET DR.
E-103
LAUDERDALE LAKES FL 33311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1579232**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCDAD, MONA
2851 SOMERSET DR.
E-103
LAUDERDALE LAKES FL 33311**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DVP** ☐ Delete
NAME **MARTIN, BARBARA**
STREET ADDRESS **2851 SOMERSET DR. E-215**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **GREEN, OLIVE**
STREET ADDRESS **2851 SOMERSET DR**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33311**

TITLE ☐ Change ☒ Addition
NAME **T CAROLE LAVOIE**
STREET ADDRESS **2851 SOMERSET DR.**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33311**

TITLE **P** ☐ Delete
NAME **MCDAD, MONA**
STREET ADDRESS **2851 SOMERSET DR. E-103**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **TROIS MAISSONS, PIERRE D**
STREET ADDRESS **2851 SOMERSET DR. E-407**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☐ Change ☒ Addition
NAME **WALTER JONES**
STREET ADDRESS **2851 SOMERSET DR.**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33311**

TITLE **S** ☒ Delete
NAME **GARY BROCKMAN**
STREET ADDRESS **2851 SOMERSET DR. E-206**
CITY-ST-ZIP **LAUDERDALE LAKES FL**

TITLE ☐ Change ☒ Addition
NAME **S MARY JANE WIRT**
STREET ADDRESS **2851 SOMERSET DR.**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33311**

TITLE **D** ☒ Delete
NAME **LAVOIE, JOHN G**
STREET ADDRESS **2851 SOMERSET DR. E-112**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☐ Change ☐ Addition
NAME **DAVID KINSMAN**
STREET ADDRESS **2851 SOMERSET DR.**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33311**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **REC PRES.**

8/31/03 954-739-5765

CR2E037 (4/03)