

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730180

FILED
Jan 14, 2009
Secretary of State

Entity Name: SOMERSET CONDOMINIUM TOWNHOUSES ASSOCIATION INCORPORATED

Current Principal Place of Business:

3347 KILMER DR.
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

3347 KILMER DR.
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 59-1688691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUAINTANCE, MICHELL
1514 KIPLING LANE
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

MONK, CARRIE
1516 KIPLING LANE
LAKELAND, FL 33803 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: CARRIE MONK

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: QUAINTANCE, MICHELL
Address: 1514 KIPLING LANE
City-St-Zip: LAKELAND, FL 33803

Title: T () Delete
Name: BROWN, ARLENE
Address: 3360 KILMER DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: VP () Delete
Name: MAISENBACHER, RICHARD
Address: 3391 KILMER DR
City-St-Zip: LAKELAND, FL 33803

Title: S () Delete
Name: BURDIN, JOHN
Address: 3303 KILMER DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: S () Delete
Name: MONK, CARRIE
Address: 1516 KIPLING LANE
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: BURDIN, JOHN
Address: 3303 KILMER DR
City-St-Zip: LAKELAND, FL 33803

Title: M (X) Change () Addition
Name: BLUME, VIRGINIA
Address: 3316 KILMER DRIVE
City-St-Zip: LAKELAND, FL 33803

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: CARRIE MONK

S

01/14/2009

Electronic Signature of Signing Officer or Director

Date