


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 8:00 am
Secretary of State

04-05-2007 90138 049 ****61.25

DOCUMENT # 742791 1. Entity Name SOMERSET C CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 64 SOMERSET C WEST PALM BEACH, FL 33417			Mailing Address 64 SOMERSET C WEST PALM BEACH, FL 33417		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1643058	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent STONES, EDDIE G 64 SOMERSET C WEST PALM BEACH, FL 33417				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <input type="checkbox"/> Change <input type="checkbox"/> Addition			
P STONES, EDDIE 64 SOMERSET C WEST PALM BEACH, FL 33417		<input type="checkbox"/> Delete			
V RESER, NANCY 45 SOMERSET C WEST PALM BEACH, FL 33417		<input type="checkbox"/> Delete			
T MRUCZKOWSKI, FRANCES 62 SOMERSET C WEST PALM BEACH, FL 33417		<input type="checkbox"/> Delete			
V STERN, HENRY 44 SOMERSET C WEST PALM BEACH, FL 33417		<input checked="" type="checkbox"/> Delete			
DS FEI, GAIL 58 SOMERSET WEST PALM BEACH, FL 33417		<input type="checkbox"/> Delete			
D TRIFOLI, FRANK 55 SOMERSET W PALM BEACH, FL 33417		<input type="checkbox"/> Delete			
V ROSEN, SY 53 Somerset C West Palm Beach, FL 33417		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					