

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742792

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

C/O PRUITTS PROPERTY MGMT  
4895 GARDNER LN  
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PRUITTS PROPERTY MGMT  
4895 GARDNER LN  
LAKE WORTH, FL 33463 US

**New Mailing Address:**

**FEI Number:** 59-1641248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRUITTS PROPERTY MGMT., INC  
4895 GARDNER LANE  
LAKE WORTH, FL 33463 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BOWMAN, FRANCIS  
Address: 84 SOMERSET E  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V  
Name: BERMAN, RUTH  
Address: 94 SOMERSET E  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S  
Name: AADLAND, ALICE  
Address: 95 SOMERSET E  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T  
Name: PIRES, FLORENCE  
Address: 89 SOMERSET E  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D  
Name: ZEUDE, ELLIE  
Address: 93 SOMERSET E  
City-St-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: DONELL PRUITT, PPM

AGT

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date