

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742796

FILED  
Apr 05, 2012  
Secretary of State

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

**Current Principal Place of Business:**

195 SOMERSET J  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

189 SOMERSET J  
WEST PALM BEACH, FL 33417 US

**Current Mailing Address:**

SOMERSET J C/O SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 59-1870165      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KAUFMAN, HERMAN  
189 SOMERSET J  
WEST PALM BEACH, FL 33417 US

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

MC ALEER, JOHN  
194 SOMERSET J  
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: JOHN MC ALEER

04/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KAUFMAN, HERMAN  
Address: 189 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: TAMBOR, ROBERTA  
Address: 195 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: GOLDBERG, SAUL  
Address: 190 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: STUTMAN, MIRIAM  
Address: 185 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: ROSEN, NORMAN  
Address: 196 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: MC ALEER, JOHN  
Address: 194 SOMERSET J  
City-St-Zip: WEST PALM BEACH, FL 33417 US

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: GALE TERRELL

C

04/05/2012

Electronic Signature of Signing Officer or Director

Date