
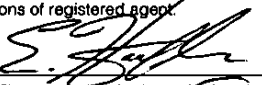
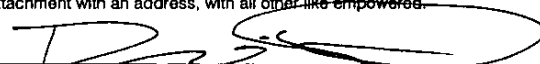


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2005 8:00 am
Secretary of State

06-22-2005 90077 001 ****61.25

DOCUMENT # 763049			
1. Entity Name SOMERSET VILLAGE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business C/O MACOR REALTY INC 10404 SW 24TH AVE GAINESVILLE, FL 32607 US		Mailing Address P.O. BOX 140502 GAINESVILLE, FL 32614 US	
2. Principal Place of Business 1731 NW 6 ST Suite, Apt. #, etc. SUITE A		3. Mailing Address P.O. BOX 14506 Suite, Apt. #, etc.	
City & State GAINESVILLE FL		City & State GAINESVILLE FL	
Zip 32609		Country ALACHUA	
4. FEI Number 59-2235786		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAXIMUM REALTY 1103 SW 2ND AVE. GAINESVILLE, FL 32601		7. Name and Address of New Registered Agent Name ED BAUR MGT. Street Address (P.O. Box Number is Not Acceptable) 1731 NW 6 ST SUITE A City GAINESVILLE FL Zip Code 32609	
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  DATE 6/15/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2005		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME PEDEN, CARMEN E	<input checked="" type="checkbox"/> Delete	TITLE President
STREET ADDRESS 1668 S.W. 16 STREET	CITY-ST-ZIP GAINESVILLE, FL 326081161		NAME David Edwards
			STREET ADDRESS 1606 SW 16th ST
			CITY-ST-ZIP Gainesville FL 32608
TITLE TD	NAME WRIGHT, CHAD	<input checked="" type="checkbox"/> Delete	TITLE Treasurer
STREET ADDRESS 1662 SW 16TH ST.	CITY-ST-ZIP GAINESVILLE, FL 32608		NAME Diette Fernandez
			STREET ADDRESS 1
			CITY-ST-ZIP Gainesville FL 32608
TITLE VD	NAME VALLADARES, RUDY	<input type="checkbox"/> Delete	
STREET ADDRESS 3848 S.W. 6 PLACE	CITY-ST-ZIP GAINESVILLE, FL 32607		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: 		DATE 6/12/05 352-335-8079	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE Daytime Phone #	

40089050



04272005 Chg-NP CR2E037 (10/03)

RECEIVED
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