

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22 1997 8:00am  
Secretary of State

DOCUMENT # F94000002769 (7)

1. Corporation Name

SOMERSET APARTMENTS, INC.

Principal Place of Business

3301 BUCKEYE RD., #207  
ATLANTA GA 30341

Mailing Address

3301 BUCKEYE RD., #207  
ATLANTA GA 30341-4236



2. Principal Place of Business

21 5600 Roswell Road

Suite, Apt. #, etc.

22 Suite 266, Prado North

City & State

23 Atlanta, GA

Zip

24 30342

Country

25 USA

2a. Mailing Address

26 5600 Roswell Road

Suite, Apt. #, etc.

27 Suite 266, Prado North

City & State

28 Atlanta, GA

Zip

29 30342

Country

30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

3. Date Incorporated or Qualified

05/26/1994

3a. Date of Last Report

04/23/1996

4. FEI Number

58-2083192

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
PTCD  
VASEN, J. STEPHEN  
STREET ADDRESS  
3301 BUCKEYE RD., #207  
CITY-ST-ZIP  
ATLANTA GA 30341

TITLE ☐ DELETE

NAME  
V  
JOHNSTON, ROBERT L  
STREET ADDRESS  
5600 ROSWELL RD., #201, PRADO NORTH  
CITY-ST-ZIP  
ATLANTA GA 30342

TITLE ☐ DELETE

NAME  
S  
WHITE, PHYLLIS C  
STREET ADDRESS  
3301 BUCKEYE RD., #207  
CITY-ST-ZIP  
ATLANTA GA 30341

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP  
5600 Roswell Road, Suite 266, Prado North  
Atlanta, GA 30342

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
5600 Roswell Road, Suite 266, Prado North  
Atlanta, GA 30342

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

J. Stephen Vasen

4/4/97

Date

404-250-1655

Daytime Phone #

0012435

CR2E034 (9/96)