2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# L05000073273

Entity Name: SOMERSET PROPERTIES, LLC

Current Principal Place of Business:

415 MEADOWLARK LANE
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

415 MEADOWLARK LANE
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 20-3227345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GASPARINI, PAULINE
415 MEADOWLARK LANE
PALM HARBOR, FL 34683 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GASPARINI, PAULINE
Address: 415 MEADOWLARK LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: MGRM ( ) Delete
Name: WILLIAMS, PETER
Address: BATHWAY FARM, BATHWAY, CHEWTON-MENDIP
City-St-Zip: ENGLAND, X X X

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: GASPARINI, DAVE
Address: 415 MEADOWLARK LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: MGRM ( ) Change (X) Addition
Name: WILLIAMS, SHEILAGH
Address: BATHWAY FARM, BATHWAY, CHEWTON-MENDIP
City-St-Zip: ENGLAND, XX XXXXX

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAULINE GASPARINI MGRM 04/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date