

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002266

FILED  
Mar 09, 2010  
Secretary of State

Entity Name: SOMERSET MASTER ASSOCIATION, INC.

## Current Principal Place of Business:

REALMANAGE  
4902 EISENHOWER BLVD, SUTIE 216  
TAMPA, FL 33634

## New Principal Place of Business:

SOMERSET MASTER ASSOCIATION, INC  
3303 PINE TOP DRIVE  
VALRICO, FL 33594

## Current Mailing Address:

REALMANAGE  
4902 EISENHOWER BLVD, SUTIE 216  
TAMPA, FL 33634

## New Mailing Address:

STEP ABOVE MANAGEMENT, INC  
PO BOX 273613  
TAMPA, FL 33688

FEI Number: 59-3716326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, WADE  
REALMANAGE  
4902 EISENHOWER BLVD, SUITE 216  
TAMPA, FL 33634 US

## Name and Address of New Registered Agent:

DUARTE, ANTONIO  
6221 LAND O LAKES BLVD.  
LAND O LAKES, FL 34638 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: ANTONIO DUARTE, III

03/09/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: SWEETSER, PETER  
Address: PO BOX 273613  
City-St-Zip: TAMPA, FL 33688

Title: S  
Name: ANDERSON, JOSEPH  
Address: PO BOX 273613  
City-St-Zip: TAMPA, FL 33688

Title: T  
Name: BELLIS, JODIE  
Address: PO BOX 273613  
City-St-Zip: TAMPA, FL 33688

Title: D  
Name: LERCH, PAUL  
Address: PO BOX 273613  
City-St-Zip: TAMPA, FL 33688

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: PETE SWEETSER

P

03/09/2010

Electronic Signature of Signing Officer or Director

Date