2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N03000009232

Entity Name: SOMERSET PTSO, INC.

Current Principal Place of Business:

20801 JOHNSON STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

20801 JOHNSON STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 20-0304448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROMEU, MERYL
16486 SW 20 STREET
MIRAMAR, FL 33027 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

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: MALONEY, EVA
Address: 3100 SW 192 AVENUE
City-St-Zip: MIRAMAR, FL 33029

Title: PD ( ) Delete
Name: ALTIERI, PAMELA
Address: 16291 SW 18 STREET
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete
Name: SNIDER, MAYRA
Address: 18804 SW 29 COURT
City-St-Zip: MIRAMAR, FL 33029

Title: VP ( ) Delete
Name: ROMEU, MERYL
Address: 16486 SW 20 STREET
City-St-Zip: MIRAMAR, FL 33027

Title: S ( ) Delete
Name: SAKAY, LORENA M
Address: 18870 SW 29 STREET
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition
Name: VIERA, MAYRA
Address: 18804 SW 29 COURT
City-St-Zip: MIRAMAR, FL 33029

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

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

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 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 an address, with all other like empowered.

SIGNATURE: MERYL ROMEU VP 05/01/2009

Electronic Signature of Signing Officer or Director — Date