

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008160

FILED
Apr 23, 2007
Secretary of State

Entity Name: SOMERSET OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14106 NW 23RD LN
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

14106 NW 23RD LN
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 20-1568893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, MONTE
14106 NW 23RD LN
GAINESVILLE, FL 32606 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: D/P () Delete
Name: MEYER, MONTE
Address: 14106 NW 23RD LN
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D/S () Delete
Name: EDENS, LISA
Address: 14127 NW 23RD LN
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D () Delete
Name: LUCKEY, CAMERON
Address: 14214 NW 23RD LN
City-St-Zip: GAINESVILLE, FL 32606 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MONTE MEYER

D/P

04/23/2007

Electronic Signature of Signing Officer or Director

Date