2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2009
Secretary of State

DOCUMENT# N06000002820

Entity Name: SOMERVILLE AT SANDOVAL SECTION II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2607 SOMERVILLE LOOP RD.
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC
PO BOX 1848
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 20-4798981 **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:

SILVERCRESTED MANAGEMENT, LLC
3440 MARINATOWN LN
NORTH FORT MYERS, FL 33903 US

Name and Address of New Registered Agent:

SILVERCRESTED MANAGEMENT, LLC
3436 MARINATOWN LANE
1ST FL UNIT 4
NORTH FORT MYERS, FL 33903 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: CHAD VAN TILBURG 06/04/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: D'ALESSANDRO, JOSEPH
Address: 218 WEST ARCTIC AVENUE
City-St-Zip: MINOLTA, NJ 08341

Title: VP ( ) Delete
Name: DIDONATO, ALBERT
Address: 2631 SOMERVILLE LOOP #701
City-St-Zip: CAPE CORAL, FL 33991

Title: ST (X) Delete
Name: RODGERS, JAMIE
Address: 2632 SOMERVILLE LOOP #1702
City-St-Zip: CAPE CORAL, FL 33991

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: JOSEPH D'ALESSANDRO JR. PD 06/04/2009
Electronic Signature of Signing Officer or Director Date