# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 26, 2008**
**Secretary of State**

DOCUMENT# N06000003974

**Entity Name:** SOMMERSET CONDOMINIUMS ASSOCIATION OF BROWARD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1060 CRYSTAL LAKE DRIVE
UNIT 301
DEERFIELD BEACH, FL 33064 US

**New Principal Place of Business:**

1060 CRYSTAL LAKE DRIVE
DEERFIELD BEACH, FL 33064 US

**Current Mailing Address:**

1060 CRYSTAL LAKE DRIVE
UNIT 301
DEERFIELD BEACH, FL 33064 US

**New Mailing Address:**

1060 CRYSTAL LAKE DRIVE
DEERFIELD BEACH, FL 33064 US

**FEI Number: 20-5161021** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOLER, ANJAL C
3325 NE 18TH STREET
FORT LAUDERDALE, FL 33305 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: PD ( ) Delete
Name: SOLER, ANJAL C
Address: 3325 NE 18TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33305 US

Title: VD ( ) Delete
Name: SATILHO, VILMA
Address: 1060 CRYSTAL LAKE DRIVE, UNIT 301
City-St-Zip: DEERFIELD BEACH, FL 33064 US

Title: STD ( ) Delete
Name: HUFER, SASCHA
Address: 10967 EL PARAISO
City-St-Zip: DELRAY BEACH, FL 33446 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: SASCHA HUFER STD 04/26/2008

Electronic Signature of Signing Officer or Director — Date