2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18787

FILED Apr 28, 2006 Secretary of State

Entity Name: SOMERSET AT THE REEF CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3215 W. GULF DR SANIBEL, FL 33957 **Current Mailing Address: New Mailing Address:** P.O. BOX 6017 15751 SAN CARLOS BLVD #8 FORT MYERS BEACH, FL 33932 FORT MYERS, FL 33908 FEI Number: 65-0076834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: D.G. SUITOR & ASSOC INC D.G. SUITOR & ASSOC INC 100 LOVERS LANE, 3RD FLOOR 15751 SAN CARLOS BLVD #8 FT MYERS, FL 33931 FT MYERS, FL 33908 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: ROD MIDDELTON 04/28/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SACCO, JOE Name: Name: 3215 W GULF DR #E101 Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: RAIA, LAWRENCE Name: RAIA, LAWRENCE Address: 3215 W GULF DR #301 Address: 19 DENISION DRIVE, EAST City-St-Zip: SANIBEL, FL 33957 City-St-Zip: SADDLE RIVER, NJ 07458 Title: () Delete Title: (X) Change () Addition NATION, LINDA M NATION, LINDA M Name: Name: 3215 W GULF DRIVE 3215 W GULF DRIVE #D201 Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip: SANIBEL, FL 33957 () Delete Title: VΡ Title: () Change () Addition SHEEHY, CY. Name: Name: Address: P.O. BOX 64562 Address: City-St-Zip: ST PAUL, MN 55164 City-St-Zip: Title: Title: () Delete () Change () Addition MEGGE, MARK, Name: Name: 3215 WEST GULF DRIVE #C301 Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA NATON P 04/28/2006