


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT** *Master*

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90096 015 \*\*\*\*61.25

<b>DOCUMENT # N33378</b> 1. Entity Name <b>SOMERSET AT BOCA GOLF &amp; TENNIS HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O UNITED COMM. MGT. 11784 W. SAMPLE RD. CORAL SPRINGS, FL 33065 US</b>			Mailing Address <b>C/O UNITED COMM. MGT. 11784 W. SAMPLE RD. CORAL SPRINGS, FL 33065 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0150499</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>RANDALL K. ROGER &amp; ASSOCIATES, P.A. 621 NW 53RD STREET SUITE 300 BOCA RATON, FL 33487</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>KARAM, GEORGE</b> <b>17270 BOCA CLUB BLVD #1701</b> <b>BOCA RATON, FL 33487</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BELL, JOSEPH S</b> <b>17274 BOCA CLUB BLVD #2307</b> <b>BOCA RATON, FL 33487</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>ROSS, MARVIN</b> <b>17286 BOCA CLUB BLVD #2107</b> <b>BOCA RATON, FL 33487</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>UPD</b> <i>Jacoby, Fred</i> <b>17270 Boca Club Dr. #1705</b> <b>Boca Raton, FL 33487</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>KRONMAN, JOAN</b> <b>17270 BOCA CLUB BLVD #1708</b> <b>BOCA RATON, FL 33487</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <i>Goldstein, Joan</i> <b>17254 Boca Club Blvd #103</b> <b>Boca Raton, FL 33487</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SHRIER, MARVIN</b> <b>17250 BOCA CLUB BLVD #104</b> <b>BOCA RATON, FL 33487</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <i>Tow, Christopher</i> <b>17276 Boca Club Blvd #1808</b> <b>Boca Raton, FL 33487</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>NEITZKE, LEROY</b> <b>17234 BOCA CLUB BLVD #103</b> <b>BOCA RATON, FL 33487</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Joseph A. Bee President</i> <b>4/22/08</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					