


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90041 045 ****61.25

DOCUMENT # N98000001225					
1. Entity Name SOMERSET L CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 222 SOMERSET L WEST PALM BEACH, FL 33417			Mailing Address 222 SOMERSET L WEST PALM BEACH, FL 33417		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0830176	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HOUGHTON, EUGENE 225 SOMERSET L WEST PALM BEACH, FL 33417			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
Filing Fee is \$61.25 Due by September 7, 2005			9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREEN, HOWARD <input type="checkbox"/> Delete 222 SOMERSET L W. PALM BCH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KESSLER, RHODA <input type="checkbox"/> Delete 227 SOMERSET LN W. PALM BCH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THURSBY, ROBERT <input checked="" type="checkbox"/> Delete 218 SOMERSET L CONDO CENTURY VILLAGE W. PALM BCH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DONALD NEEMS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 230 SOMERSET L W. PALM BEACH, FL 334172134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, HOWARD <input type="checkbox"/> Delete 222 SOMERSET LN W. PALM BCH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PSICHOGIOS, HARRY <input type="checkbox"/> Delete 228 SOMERSET LN W. PALM BCH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FINEMAN, BARBARA <input type="checkbox"/> Delete 219 SOMERSET L, CONDO CENTURY VILLAGE WEST PALM BEACH, FL 334172134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
SIGNATURE: <i>Rhoda Kessler</i> RHODA KESSLER <i>7/12/05</i> 561-478-8559					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					