2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P04000096735

Entity Name: SOMERSET ORGANICS, INC.

Current Principal Place of Business:

500 5TH AVENUE SOUTH
SUITE 526
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

500 5TH AVENUE SOUTH
SUITE 522
NAPLES, FL 34102

New Mailing Address:

FEI Number: 30-0265182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REED, DONALD P
100 SECOND AVENUE SOUTH
SUITE 200-S
ST. PETERSBURG, FL 33701 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	SANTERRE, L JAMES	
Address:	1120 B ROAD	
City-St-Zip:	LABELLE, FL 33935	
Title:	ST	( ) Delete
Name:	SANTERRE, RICHARD J	
Address:	500 5TH AVE SOUTH STE 522	
City-St-Zip:	NAPLES, FL 34102	
Title:	VP	(X) Delete
Name:	PERRA, BRUCE	
Address:	500 5TH AVE SOUTH STE 526	
City-St-Zip:	NAPLES, FL 34102	
Title:	VP	( ) Delete
Name:	BRYSON, AARON	
Address:	500 5TH AVE SOUTH STE 526	
City-St-Zip:	NAPLES, FL 34102	
Title:	VP	(X) Delete
Name:	SMITH, MIKE	
Address:	500 5TH AVE SOUTH STE 526	
City-St-Zip:	NAPLES, FL 34102	
Title:	VP	(X) Delete
Name:	JOHNSON, JAMES B	
Address:	500 5TH AVE S 526	
City-St-Zip:	NAPLES, FL 34102	

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:	
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON BRYSON VP 04/30/2008

Electronic Signature of Signing Officer or Director — Date