

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753960

FILED  
Feb 09, 2010  
Secretary of State

Entity Name: CAMELOT-BY-THE-LAKE CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

2180 W STATE ROAD 434, STE 5000  
LONGWOOD, FL 32779

**New Principal Place of Business:**

2180 W STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 32779

**Current Mailing Address:**

2180 W STATE ROAD 434, STE 5000  
LONGWOOD, FL 32779

**New Mailing Address:**

2180 W STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 32779

FEI Number: 59-2112701

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HART, JAMES W  
SENTRY MANAGEMENT, INC.  
2180 W. STATE ROAD 434, SUITE 5000  
LONGWOOD, FL 32779 US

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

HART, JAMES W JR  
SENTRY MANAGEMENT, INC.  
2180 W. STATE ROAD 434, SUITE 5000  
LONGWOOD, FL 32779 US

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: JAMES W HART JR

02/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: GARNER, MARK  
Address: 5329 HANSEL AVE #B-1  
City-St-Zip: ORLANDO, FL 32809

Title: TD  
Name: BROOKS, YVONNE  
Address: 5339 HANSEL AVE #C-18  
City-St-Zip: ORLANDO, FL 32809

Title: SD  
Name: HOFFMAN, ELMO  
Address: 5401 HANSEL AVE #G-1  
City-St-Zip: ORLANDO, FL 32809

Title: PD  
Name: HARRIS, COZETTE  
Address: 5441 HANSEL AVE #J-16  
City-St-Zip: ORLANDO, FL 32809

Title: D  
Name: COLLIER, JOHN  
Address: 5439 HANSEL AVE #J-12  
City-St-Zip: ORLANDO, FL 32809

Title: D  
Name: SABATA, NATASHA  
Address: 5339 HANSEL AVE #C-15  
City-St-Zip: ORLANDO, FL 32809

I hereby 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 all other like empowered.

SIGNATURE: COZETTE HARRIS

PD

02/09/2010

Electronic Signature of Signing Officer or Director

Date