2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002888

FILED Feb 14, 2011 Secretary of State

Entity Name: CAMELOT VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

320 HIGH TIDE DRIVE 6203 CORTEZ RD. W. SUITE 100 F BRADENTON, FL 34210

SAINT AUGUSTINE BEACH, FL 32080

Current Mailing Address: New Mailing Address:

320 HIGH TIDE DRIVE 6203 CORTEZ RD. W. SUITE 100 F BRADENTON, FL 34210

SUITE 100 F BRADENTON, FL 342 SAINT AUGUSTINE BEACH, FL 32080

FEI Number: 20-3367101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MEB REAL ESTATE MANAGEMENT, INC.

320 HIGH TIDE DRIVE

SUITE 100 F

MEB REAL ESTATE MANAGEMENT, INC.
6203 CORTEZ RD. W.
BRADENTON FL 34210 US

SUITE 100 F BRADENTON, FL 34210 U SAINT AUGUSTINE BEACH, FL 32080 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: BARBARA HEMINGWAY AS AGENT 02/14/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: SLAMKA, STACEY
Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

Title: VPD
Name: MEADE, JOSH
Address: 6203 CORTEZ RD. W.

Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

Title: SD

Name: VANSKIVER, JENNIFER
Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

Title: TD

Name: HESTBECK, JOHN
Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

Title:

Name: PHILLIPS, JONATHAN
Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

Title:

Name: GERONIMO, JOAN
Address: 6203 CORTEZ RD. W.
City-St-Zip: BRADENTON, FL 34210

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: BARBARA HEMINGWAY MNG 02/14/2011