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: JORDAN ZUEGER

City-State-Zip: CAPE CORAL FL 33909

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 760995

Entity Name: CAMELOT RESIDENCE'S ASSOCIATION, INC.

Current Principal Place of Business:

CAMELOT ESTATES 3152 SIR HAMILTON CIR. TITUSVILLE, FL 32780

Current Mailing Address:

CAMELOT RESIDENCE'S **PO BOX 248** TITUSVILLE, FL 32780 US

FEI Number: 59-2266222

Name and Address of Current Registered Agent:

WATTS, KATHLEEN 1603 GABLE COURT MERRITT ISLAND, FL 32953-3190 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.

SIGNATURI	E: KATHLEEN WATTS			02/22/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	VP	
Name	ZUEGER, JORDAN	Name	ANDERSEN, JASON	
Address	3142 SIR HAMILTON CIRCLE	Address	4350 FLOOD STREET	
City-State-Zip:	TITUSVILLE FL 32780	City-State-Zip:	COCOA FL 32927-7934	
Title	SECRETARY	Title	DIRECTOR	
Name	DRAKE, DONALD	Name	LINDLE, JEFFREY	
Address	2952 SIR HAMILTON CIRCLE	Address	3048 SIR HAMILTON CIRCLE	
City-State-Zip:	TITUSVILLE FL 32780	City-State-Zip:	TITUSVILLE FL 32780	
Title	DIRECTOR	Title	TREASURER	
Name	BLANKENSHIP, MARLENE	Name	LUCKS, KIM	
Address	3102 SIR HAMILTON CIRCLE	Address	PO BOX 335	
City-State-Zip:	TITUSVILLE FL 32780	City-State-Zip:	SCOTTSMOOR FL 32775	
Title	DIRECTOR			
Name	DAY, TIMOTHY			
Address	2593 SAWGRASS LAKE CT			

Certificate of Status Desired: No

PRESIDENT

FILED Feb 22, 2021 Secretary of State 0220330757CC