Entity Name Current Prin 191 PINE LANE	# N0500008230 : CAMELOT TOWNHOME OWNERS' ASSO incipal Place of Business: LE, FL 32327	CIATION, INC.	-	8, 2013 y of State /118086
Current Mai	ling Address:			
P.O. BOX 29 CRAWFORE	18 DVILLE, FL 32326 US			
FEI Number: 55-0903595 Certificate of Status I			Certificate of Status Des	ired: No
Name and Address of Current Registered Agent:				
ROJAS, COLLEEN E 191 PINE LANE CRAWFORDVILLE, FL 32327 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.				
		istered office or regis	tered agent, or both, in the State of Fic	orida.
	Electronic Signature of Registered Agent			03/03/2013 Date
	Electronic Signature of Registered Agent			03/03/2013
Officer/Dire	Electronic Signature of Registered Agent	Title	VP	03/03/2013
	Electronic Signature of Registered Agent ctor Detail : P	Title Name	VP WILLIAMS. KAREN	03/03/2013
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : P		VP WILLIAMS, KAREN PO BOX 298	03/03/2013
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : P RUEHL , COLLEEN	Name Address	WILLIAMS, KAREN	03/03/2013
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : P RUEHL , COLLEEN PO BOX 298	Name Address	WILLIAMS, KAREN PO BOX 298	03/03/2013
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : P RUEHL , COLLEEN PO BOX 298 CRAWFORDVILLE FL 32326	Name Address	WILLIAMS, KAREN PO BOX 298	03/03/2013
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : P RUEHL , COLLEEN PO BOX 298 CRAWFORDVILLE FL 32326 ST	Name Address	WILLIAMS, KAREN PO BOX 298	03/03/2013

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: COLLEEN RUEHL

PRESIDENT

03/03/2013

Electronic Signature of Signing Officer/Director Detail

FILED Mar 03. 2013