

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704207

FILED
Apr 05, 2008
Secretary of State

Entity Name: CAMELLIA TERRACE, INC.

Current Principal Place of Business:

3530 N E 23RD AVENUE
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

3530 NE 23RD AWW
#4
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

3530 NE 23RD AVE
#4
LIGHTHOUSE POINT, FL 33064

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEMENUK, MARGARET M TREASUR
3300 NE 31 AVENUE
LIGHTHOUSE POINT, FL 33064 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAPOLLA, MARIE
Address: 3530 NE 23RD AVE., #4
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DS () Delete
Name: GAWRON, MARION
Address: 3530 NE 23RD AVE #7
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DT () Delete
Name: SEMENUK, MARGARET M
Address: 3300 NE 31ST AVE.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: () Delete
Name:
Address:
City-St-Zip:

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: DS () Change (X) Addition
Name: BAMMAN, GAIL
Address: 3530 #1 NE 23RD AVE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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

SIGNATURE: MARGARET M SEMENUK

TRES

04/05/2008

Electronic Signature of Signing Officer or Director

Date