

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

1995



DOCUMENT # **714649** (1)

**CAMELOT HALL CONDOMINIUM CORP., INC.**

21. <b>Camelot Hall Condominium</b>		22. <b>4321 NW 16th St</b>		23. <b>Lauderhill FL.</b>		24. <b>33313</b>		25. <b>USA</b>		26. <b>4321 NW 16 th ST.</b>		27. <b>Lauderhill FL.</b>		28. <b>33313</b>		29. <b>USA</b>													
3. Date first reported (Not Applicable)										3a. Date of Last Report		4. FE Number		5. Certificate of Status Required		6. Fee to be charged for change of status		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status		8. This corporation is not subject to the provisions of Chapter 607, Florida Statutes.									
										05/24/1968		04/26/1994		59-1320384		<input type="checkbox"/>		\$8.75 Additional Fee Required		<input type="checkbox"/>		\$5.00 May Be Added to Fees		<input type="checkbox"/>		\$68.75 Supplemental Fee Not Required		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent										10. Name and Address of New Registered Agent									
LAUDERHILL TEN MANAGEMENT CORP 4301 N.W. 16TH ST. LAUDERHILL FL 33313										B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 City B4 State <b>FL</b> B5 Zip Code									

11. I, the undersigned, the president of the corporation, and 607 Florida Statutes, the above named corporation, certifies the statement for the purpose of changing its registered office of incorporation to that of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the registered agent.

SIGNATURE: *John M. Kinnon* **JOHN M. KINNON** MANAGER **4/25/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS AND DIRECTORS	
NAME: <b>VD</b> GATIN, GERARD 4321 N.W. 16TH ST. LAUDERHILL, FL 0	OFFICE: <b>VP.</b>	NAME: <b>GATIN GERARD</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: <b>ST</b> VAN ANTWERP, DOROTHY 4321 NW 16TH STREET LAUDERHILL, FL 00000	OFFICE: <b>S.T.</b>	NAME: <b>VAN ANTWERP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: <b>PD</b> FRANKEL, ARNOLD 4321 NW 16TH STREET LAUDERHILL, FL 00000	OFFICE: <b>PD</b>	NAME: <b>FRANKEL ARNOLD</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: <b>D</b> ANTAYA, CLAUDE 4321 N.W. 16TH ST. LAUDERHILL, FL 00000	OFFICE: <b>D</b>	NAME: <b>ANTAYA CLAUDE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: <b>D</b> PETERS, MARGARET 4321 NW 16TH STREET LAUDERHILL, FL 00000	OFFICE: <b>D</b>	NAME: <b>LAJOIE BERTRAND</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information reported with this filing is voluntarily prepared and does not qualify for the exemption stated in Section 119.021, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1 of Block 1 of this report as an attachment with an address.

SIGNATURE: *[Signature]* **4/25/95** **305-404-0137**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR