

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756042

FILED
Jan 17, 2009
Secretary of State

Entity Name: CAMELOT ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3355 S. ATLANTIC AVENUE #3
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

3355 S. ATLANTIC AVENUE #3
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-2882214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHOADES, O' BRIEN, ROBERTA S
3355 S ATLANTIC AVE #3
COCOA BEACH., FL 32931 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: STD () Delete
Name: CARLSON, PATRICIA
Address: 3355 SO ATLANTIC AVE #4
City-St-Zip: COCOA BEACH, FL 32931

Title: VPD () Delete
Name: SHARPE, KELLI
Address: 3355 S ATLANTIC AVE #1
City-St-Zip: COCOA BEACH, FL 32931

Title: VPD () Delete
Name: CARLSON, KIMBERLY
Address: 3355 SO ATLANTIA AVE #2
City-St-Zip: COCOA BEACH, FL 32931

Title: PD () Delete
Name: O'BRIEN, ROBERTA S
Address: 3355 SO ATLANTIC #3
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: WRIGHT, MIKE
Address: 3355 SO ATLANTIA AVE #2
City-St-Zip: COCOA BEACH, FL 32931

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERTA RHOADES O'BRIEN

PD

01/17/2009

Electronic Signature of Signing Officer or Director

Date