

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756169

FILED  
Mar 04, 2009  
Secretary of State

**Entity Name:** CAMELOT CONDOMINIUM ASSOCIATION OF MARCO ISLAND, INC.

**Current Principal Place of Business:**

961 COLLIER COURT  
MARCO ISLAND, FL 33937

**New Principal Place of Business:**

**Current Mailing Address:**

961 COLLIER COURT  
MARCO ISLAND, FL 33937

**New Mailing Address:**

**FEI Number:** 59-2099469

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARTIN, THOMAS  
961 COLLIER BLVD, P7  
MARCO ISLAND, FL 34145 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: MARTIN, TOM  
Address: 961 COLLIER BLVD P7  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: MILLER, DONALD  
Address: 961 COLLIER CT # P2  
City-St-Zip: MARCO ISLAND, FL

Title: D ( ) Delete  
Name: WERZEL, BRUCE  
Address: 961 COLLIER CT., UNIT 204  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: HENNINGER, LYNN  
Address: 961 COLLIER CT 101  
City-St-Zip: MARCO ISLAND, FL 34145

Title: S ( ) Delete  
Name: ZENTER, ROBIN  
Address: 961 COLLIER BLVD, P5  
City-St-Zip: MARCO ISLAND, FL 34145

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

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: THOMAS MARTIN

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date