## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 03, 2008 **DOCUMENT#768223** Secretary of State

Entity Name: CAMELOT OF PINELLAS PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5922 9 AVE N 1319 17TH AVENUE NORTH ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33704

**Current Mailing Address: New Mailing Address:** 

5922 9 AVE N 1319 17TH AVENUE NORTH ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33704

FEI Number: 59-2382132 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALL COUNTY PROPERTY MANAGEMENT HILLARD & ROGERS, P.A 5922 9 AVE N 13143 66TH STREET NORTH ST PETERSBURG, FL 33710 US ST PETERSBURG, FL 33773

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: BENJAMIN HILLARD 09/03/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition FLACHSMANN, HERMANN FOURMANOV, DMITRI Name: Name:

5922 9 AVE N Address: 1319 17TH AVENUE NORTH Address: City-St-Zip: ST PETE, FL 33710 City-St-Zip: ST. PETERSBURG, FL 33704

(X) Change ( ) Addition Title: Title: ( ) Delete KHARZOUS, VALARIE Name: FLACHSMANN, HERMANN Name:

Address: 5922 9 AVE N Address: 1085 EDEN ISLE DR. NE City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33704

Title: () Delete Title: SEC (X) Change ( ) Addition CHANCEY, TOM KHARZOUZ, VALERIE Name: Name:

Address: 5922 9 AVE N Address: 11425 1ST ST E #1

City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: TREASURE ISLAND, FL 33706

Title: () Delete Title: **TRES** ( ) Change (X) Addition

JANKOWSKI, JAN Name: Name:

7200 ULMERTON ROAD UNIT D5 Address: Address:

City-St-Zip: City-St-Zip: LARGO, FL 33771

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: DMITRI FOURMANOV **PRES** 09/03/2008