

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014605

Entity Name: CAMELOT RESALES, LLC

FILED  
Feb 27, 2007  
Secretary of State

## Current Principal Place of Business:

6416 CLARK ROAD  
SARASOTA, FL 34241 US

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 19001  
SARASOTA, FL 34276 US

## New Mailing Address:

FEI Number: 65-1134907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORD, JAMES M  
C/O CAMELOT COMMUNITIES  
6300 QUEENSBURY BLVD.  
SARASOTA, FL 34241 US

## Name and Address of New Registered Agent:

FORD, JAMES M  
6416 CLARK RD  
SARASOTA, FL 34241 US

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: JAMES M FORD

02/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FORD, JAMES M  
Address: 6416 CLARK ROAD  
City-St-Zip: SARASOTA, FL 34241 US

Title: MGRM ( ) Delete  
Name: HEWITT, WILLIAM F  
Address: P.O. BOX 19288  
City-St-Zip: SARASOTA, FL 34276

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FORD, JAMES M  
Address: P O BOX 19001  
City-St-Zip: SARASOTA, FL 34276 US

Title: MGRM (X) Change ( ) Addition  
Name: FORD, SHERRYL A  
Address: P.O. BOX 19001  
City-St-Zip: SARASOTA, FL 34276 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES M FORD

MGRM

02/27/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date