2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L78086

1. Entity Name

CAMELOT REALTY GROUP INC.



FILED Mar 21, 2003 8:00 am Secretary of State

03-21-2003 90103 050 ***150.00

CAIVIELC	T REALIT GROUP, INC.				
Principal Place of Business % THOMAS G. ROTTINGHAUS 885 SE 47TH TERR CAPE CORAL FL 33904		Mailing Address % THOMAS G. ROTTINGHAUS 885 SE 47TH TERR CAPE CORAL FL 33904			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING	CHANGES
City & State		City & State		4. FEI Number 65-0207267	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered A	
COTTINO	UALIC TIONAL O		Name		
1175 SW	haus, thomas G. 57th street		Street Address	s (P.O. Box Number is Not Acceptable)	
CAPE CO	RAL FL 33914		-		
i	-		City	FL	Zip Code
8. The above the obligation	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	s registered office or regist	tered agent, or both, in the State of Florida. I am fa	amiliar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	E: Registered Agent signature requir	red when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of			9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS AND		11.	ADDITIONS /CHANGES TO OFFICERS AND	SUPERATORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROTTINGHAUS, THOMAS G. 1175 SW 57TH STREET CAPE CORAL FL 33914	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11 Change Addition
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ار پاران میبر نیوست ۱۰۰۰ در ۱۰	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
	ertify that the information supplied with to this report or supplemental report is	this filing does not qualify for		ection 119.07(3)(i), Florida Statutes. I further certify	y that the information

of the corporation or the receiver fruit earning and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.