

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005131

FILED
Feb 21, 2006
Secretary of State

Entity Name: CAMELOT AT MANDARIN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12889 CANNINGTON COVE TERRACE
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

12889 CANNINGTON COVE TERRACE
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 42-1555926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATIFF, MARK
12889 CANNINGTON COVE TERRACE
JACKSONVILLE, FL 32258 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: LATIFF, MARK
Address: 12889 CANNINGTON COVE TERRACE
City-St-Zip: JACKSONVILLE, FL 32258

Title: VT () Delete
Name: GORE, TERESA
Address: 12865 CANNINGTON COVE TERRACE
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: GORE, KEN
Address: 12865 CANNINGTON COVE TERRACE
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LATIFF, MARK
Address: 12889 CANNINGTON COVE TERRACE
City-St-Zip: JACKSONVILLE, FL 32258

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

Title: D (X) Change () Addition
Name: GORE, KEN
Address: 12865 CANNINGTON COVE TERRACE
City-St-Zip: JACKSONVILLE, FL 32258

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 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: TERESA GORE

VT

02/21/2006

Electronic Signature of Signing Officer or Director

Date