

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007181

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** CAMELOT DAYS, INC.

**Current Principal Place of Business:**

2940 SW 154 LN  
DAVIE, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

6971 SW 64TH ST  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 54-2122511

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANAFOURDE, B.K  
6971 HARDEE RD  
MIAMI, FL 33143 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: D/P  
Name: HANAFOURDE, BRADLEY K  
Address: 6971 SW 64TH ST.  
City-St-Zip: MIAMI, FL 33143

Title: D  
Name: GERBER, SARAH  
Address: 6971 SW 64TH ST.  
City-St-Zip: MIAMI, FL 33143

Title: D  
Name: CRICHTON, BOBBIE  
Address: 2940 SW 154 LN  
City-St-Zip: DAVIE, FL 33331

Title: D  
Name: NORRIS, MARCIA A  
Address: 8957 NW 44 CT  
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: D  
Name: ROBERTS, MICHELLE  
Address: 6530 NW 211 CT APT.B  
City-St-Zip: POMPANO BEACH, FL 33063

I hereby 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 all other like empowered.

SIGNATURE: B.K.HANAFOURDE

PRES

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date