2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 09, 2007 8:00 am **Secretary of State**

03-09-2007 90001 031 ****61.25

DOCUMENT # N06000000352 CAMELLIA GREEN PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 2020 CLUBHOUSE DRIVE 2020 CLUBHOUSE DRIVE 40032344 SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573 3. Mailing Address 2. Pfincipal Place of Business - No P.O. Box 409 E 2011ege Suite, Apt. #, etc. Suite, Apt. #, etc. 02202007 Cha-NP CR2E037 (12/06) Gity & State Oty & State 4. FEI Number Applied For Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Irimmer Kathy HASTINGS, VIVIEN N Street Address (P.O. Box Number is Not Acceptable) 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134 City() <u>مەلادە</u> 8. 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. I am familiar with, and accept the obligations of registered agent. Morrida SIGNATURE me of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. 'ces TITLE Delete THTLE Change Addition BEYER, R.C. JR NAME NAME Britten, Linda 735 Carrellin Glea De. Sun City Center Fr. 2020 CLUBHOUSE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER, FL 33573 CITY-ST-ZIP <u> 33573</u> TITLE Delete TITLE V. Pæs Addition A ☐ Change NELSON, GARY NAME NAME Mc GARY Canelia 2020 CLUBHOUSE DRIVE STREET ADDRESS STREET ADDRESS 730 Comellia Gree De Sun City Centr FL 3 SUN CITY CENTER, FL 33573 CITY-ST-ZIP CCTY-ST-ZIP STD TITLE TITLE Sec/ Tres Addition Delete ☐ Change Butler Raymond 713 Cancilla Green DA. KEITH, SYLVIA NAME NAME 2020 CLUBHOUSE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER, FL 33573 CITY-ST-ZIP 33573 Sun City Center YL TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF TITLE ☐ Delete Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #