

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008955

Entity Name: CAMELLIA ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 14, 2011
Secretary of State
VOID

Current Principal Place of Business:

7001 TEMPLE TERRACE HIGHWAY
TAMPA, FL 33637 US

New Principal Place of Business:

429 S. NAVY BLVD.
C/O MYHOMESPOT
PENSACOLA, FL 32507 US

Current Mailing Address:

7001 TEMPLE TERRACE HWY.
TAMPA, FL 33637 US

New Mailing Address:

429 S. NAVY BLVD.
C/O MYHOMESPOT
PENSACOLA, FL 32507 US

FEI Number: 20-8899541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIANFRONE, JOSEPH PA
1964 BAYSHORE BLVD.
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

GLENN DORSEY, INC.
429 S. NAVY BLVD.
PENSACOLA, FL 32507 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: GLENN DORSEY

02/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: KESTERSON, STEPHEN
Address: 1828 SNAPDRAGO DR
City-St-Zip: NAVARRE, FL 32566

Title: SD
Name: OTTLEY, KARINA
Address: 2663 HIDDEN CREEK DR
City-St-Zip: NAVARRE, FL 32566

Title: TD
Name: PAULZAK, MICHAEL
Address: 7094 CALLE DE NARVAEZ
City-St-Zip: NAVARRE, FL 32566

FILED IN ERROR, SHOULD HAVE BEEN FOR
A CORPORATION WITH A SIMILAR NAME, SEE
LETTER ATTACHED TO ANNUAL REPORT FILED
APRIL 1, 2011 ON N03000001727. SPT 4-20-11

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: JANET NOWAKOWSKI

MGR

02/14/2011

Electronic Signature of Signing Officer or Director

Date