

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90347 024 ****61.25

DOCUMENT # N24087

1. Entity Name
CAMELOT EAST HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
**3900 CLARK ROAD
STE L-1
SARASOTA, FL 34233 US**

Mailing Address
**3900 CLARK ROAD
STE L-1
SARASOTA, FL 34233 US**

40049703



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03212006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0021262

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DOMBER, HARLAN R.
3900 CLARK ROAD
STE L-1
SARASOTA, FL 34233**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BELEY, JANE**
STREET ADDRESS **5611 SCARBOROUGH LANE**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **1VD** ☒ Delete
NAME **BLACK, LES**
STREET ADDRESS **5468 HARROW TERR.**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **2VD** ☒ Delete
NAME **MASSENA, ROBERT**
STREET ADDRESS **6356 LICHFIELD LANE**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **P** ☒ Delete
NAME **ERCEGOVICH, AUDREY**
STREET ADDRESS **5411 HARROW TERRACE**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **SD** ☒ Delete
NAME **BELSER, CAROL**
STREET ADDRESS **5704 SCARBOROUGH LN**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **TD** ☐ Delete
NAME **BURRILL, HELEN**
STREET ADDRESS **5523 SEVEN OAKS DRIVE**
CITY-ST-ZIP **SARASOTA, FL 34241**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **1VD** ☐ Change ☒ Addition
NAME **RUSE, ROBERT**
STREET ADDRESS **6312 Litchfield Ave.**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE **2VD** ☐ Change ☒ Addition
NAME **DUFF, STUART**
STREET ADDRESS **5450 Kingsbridge Dr.**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE **PD** ☐ Change ☒ Addition
NAME **OLSON, LARRY**
STREET ADDRESS **5210 Wellfleet Dr. S.**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE **SD** ☐ Change ☒ Addition
NAME **SCHULER, FLORENCE**
STREET ADDRESS **5463 Kingsbridge Dr.**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Helen H. Burrill

x HELEN H. BURRILL x TREASURER

x 4/12/06 x 941-922-7217

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

40049703
#N24087

Supplement to 2006 Not-For-Profit Corporation Uniform Business Report
for Camelot East Homeowners' Association, Inc.
Document #N24087

Section 10, Continued:
Additional Officers and Directors

D
Sexauer, Rod
5726 Axminster Drive
Sarasota, FL 34241