2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State
04-30-2007 90438 012 ****61.25

DOCUMENT # N29690

1. Entity Name
CAMELOT GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O LANDEX RESORTS INT'L 1100 HOMESTEAD RD. N LEHIGH ACRES, FL 33936 US	1100 HOMESTEAD RD N LEHIGH ACRES, FL 33936 US

01252007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0143194 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SEIDEL, FRED R CAM/CHA C/O LANDEX RESORTS INT'L 1100 HOMESTEAD RD. LEHIGH ACRES, FL 33936	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 Fred R Seidel CAM/CHA DATE 4/26/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MILENKVICH, JOE 55 CAMELOT GARDENS BLVD #213 LEHIGH ACRES, FL 33936	☐ Delete	VPD MILENKEVICH, JOE 55 CAMELOT GARDENS BLVD. #213 LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD MARION, MELTON 59 CAMELOT GARDENS BLVD#109 LEHIGH ACRES, FL 33936	☐ Delete	TD MELTON, MARION 59 CAMELOT GARDENS BLVD. #109 LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WINKEL, JUNE 59 CAMELOT GARDENS BLVD #203 LEHIGH ACRES, FL 33936	☐ Delete	SD WINKEL, JUNE 59 CAMELOT GARDENS BLVD # 203 LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANNING, JAMES 59 CAMELOT GARDENS BLVD #210 LEHIGH ACRES, FL 33936	☐ Delete	PD HANNING, JAMES 59 CAMELOT GARDENS BLVD. #210 LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD AMATO, DOROTHY 51 CAMELOT GARDENS BLVD., #204 LEHIGH ACRES, FL 33936	☐ Delete	D AMATO, DOROTHY 51 CAMELOT GARDENS BLVD. #204	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Fred R Seidel CAM/CHA 4/26/07 239-369-5848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #