2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N29690

Entity Name: CAMELOT GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LANDEX RESORTS INT'L
1100 HOMESTEAD RD. N
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

1100 HOMESTEAD RD N
LEHIGH ACRES, FL 33936 US

New Mailing Address:

FEI Number: 65-0143194 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, DARLENE CAM
C/O LANDEX RESORTS INT"L
1100 HOMESTEAD RD. N.
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

MINKO, DARLENE CAM
C/O LANDEX RESORTS INT"L
1100 HOMESTEAD RD. N.
LEHIGH ACRES, FL 33936 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: DARLENE MINKO 02/05/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GREEN, JAMES
Address: 1624 COVINGTON MEADOWS CIR #203
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TD ( ) Delete
Name: MARION, MELTON
Address: 59 CAMELOT GARDENS BLVD#109
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SD ( ) Delete
Name: WINKEL, JUNE
Address: 59 CAMELOT GARDENS BLVD #203
City-St-Zip: LEHIGH ACRES, FL 33936

Title: PD ( ) Delete
Name: HANNING, JAMES
Address: 59 CAMELOT GARDENS BLVD #210
City-St-Zip: LEHIGH ACRES, FL 33936

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: GREEN, JAMES
Address: 1624 COVINGTON MEADOWS CIR #202
City-St-Zip: LEHIGH ACRES, FL 33936

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD ( ) Change (X) Addition
Name: MILENKEVICH, JOE
Address: 55CAMELOT GARDENS BLVD #213
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES HANNING PD 02/05/2009
Electronic Signature of Signing Officer or Director Date