2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003374

FILED Feb 22, 2011 Secretary of State

Entity Name: CAMELOT COMMUNITY CARE, INC.

Current Principal Place of Business: New Principal Place of Business:

4910-D CREEKSIDE DR

CLEARWATER, FL 33760 US

Current Mailing Address: New Mailing Address:

4910-D CREEKSIDE DR

CLEARWATER, FL 33760 US

FEI Number: 31-1659302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD

Name: ADDUCCI, ALEXANDER
Address: 4910-D CREEKSIDE DR
City-St-Zip: CLEARWATER, FL 33760 US

Title: D

Name: DRIVER, TAMMI

Address: 4910-D CREEKSIDE DRIVE City-St-Zip: CLEARWATER, FL 33760 US

Title:

Name: SHERIDAN, DAE PHD
Address: 4910-D CREEKSIDE DRIVE
City-St-Zip: CLEARWATER, FL 33760 US

Title: DT

Name: PINGEL, RICHARD

Address: 4910-D CREEKSIDE DRIVE City-St-Zip: CLEARWATER, FL 33760 US

Title:

Name: DIBRIZZI, MICHAEL
Address: 4910-D CREEKSIDE DRIVE
City-St-Zip: CLEARWATER, FL 33760 US

Title:

Name: SCHULTZ, RONALD JR.
Address: 4910-D CREEKSIDE DRIVE
City-St-Zip: CLEARWATER, FL 33760 US

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: MICHAEL DIBRIZZI PRES 02/22/2011