2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# P02000103099

Entity Name: CAMELOT TOWNHOMES OF WAKULLA, INC.

Current Principal Place of Business:

P.O. BOX 3102
TALLAHASSEE, FL 32315 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3102
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 72-1541569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARLEY, KENNETH R
2716 MASTERSON LN.
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALLEN, MARVIN H
Address: 745 LUPINE LN
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VP ( ) Delete
Name: COPELAND, DAVID B
Address: 1767 HERMITAGE BLVD. #9303
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: T ( ) Delete
Name: COPELAND, CHRIS P
Address: 3208 ROBIN HOOD DR
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: S ( ) Delete
Name: HARLEY, KENNETH R
Address: 2716 MASTERSON LN.
City-St-Zip: TALLAHASSEE, FL 32311 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: COPELAND, DAVID B
Address: 4240 RABBIT POND RD.
City-St-Zip: TALLAHASSEE, FL 32309 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARVIN H. ALLEN P 05/01/2005

Electronic Signature of Signing Officer or Director Date