

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013068

**FILED**  
**Mar 29, 2005**  
**Secretary of State**

**Entity Name:** CAMELOT REAALTY OF BREVARD II, INC

**Current Principal Place of Business:**

1491 N.E. EMERSON DRIVE  
PALM BAY, FL 32907 US

**New Principal Place of Business:**

**Current Mailing Address:**

1491 N.E. EMERSON DRIVE  
PALM BAY, FL 32907 US

**New Mailing Address:**

7100 N. ATLANTIC AVE.  
CAPE CANAVERAL, FL 32920 US

**FEI Number:** 65-1229247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINDEN, DONNA M  
1491 N.E. EMERSON DRIVE  
PALM BAY, FL 22907 US

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

LINDEN, DONNA M  
436 S. BANANA RIVER BLVD.  
COCOA BEACH, FL 32931 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

03/29/2005

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LINDEN, DONNA M  
Address: 5360 N. ATLANTIC AVE.  
City-St-Zip: COCOA BEACH, FL 32931 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LINDEN, DONNA M  
Address: 7100 N. ATLANTIC AVE.  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

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: DONNA M. LINDEN

Electronic Signature of Signing Officer or Director

P

03/29/2005

Date