2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25899

FILED Jan 19, 2007 Secretary of State

Entity Name: CAMELOT CARE CENTERS, INC.

	rincipal Place		New Principal Plac	
10304 SPC BRD FLOC	OTSYLVANIA A OR	WE		
	CKSBURG, VA	22408 US		
Current M	ailing Addres	s:	New Mailing Addre	ss:
5524 E FO TUCSON,		JS		
El Number:	36-3465604	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
CORPORA	ATION SERVIC	E COMPANY		
1201 HAYS	STREET	M 110		
IALLAMAS	SSEE, FL 3230	01 US		
The above	named entity s	submits this statement for the	nurnose of changing its register	red office or registered agent, or both,
		submits this statement for the	burpose of changing its register	ca office of registered agent, or both,
	of Florida.			
	of Florida.			
n the State	e of Florida.	ic Signature of Registered Ag	ent	Date
n the State SIGNATUF	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	Date
n the State SIGNATUF	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	Date
n the State SIGNATUF	e of Florida. RE: Electron	g Trust Fund Contribution ().		Date GES TO OFFICERS AND DIRECTOR
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I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL DEITCH ST 01/19/2007