

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000008720 (2)

1. Corporation Name
CAMELOT LANDSCAPING, INC.



Principal Place of Business
604 N G ST
LAKE WORTH FL 33460
US

Mailing Address
~~P.O. BOX 0525~~
~~LANTANA FL 33465~~
~~US~~

3. Date Incorporated or Qualified 01/24/1994 3a. Date of Last Record 08/11/1995

2. Principal Place of Business

21 Suite, Apt. #, etc. 26 604 N. "G" ST.

22 City & State

23 Lake Worth, FL

24 Zip 25 Country 29 33460 30 US

4. FEI Number 65-0465070 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAUTENKRANZ, DOUGLAS E SR
~~216 EAST LAKE WORTH~~
~~LANTANA FL 33462~~

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
3441 SE Micanopy Terr.
83
84 City Stuart FL 85 Zip Code 34997

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NONE. Registered Agent signature required when reinstating)

DATE

4/16/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RAUTENKRANZ, DOUGLAS E SR
STREET ADDRESS ~~216 EAST LAKE WORTH AVENUE~~
CITY-ST-ZIP ~~LANTANA FL 33462~~

TITLE STD
NAME RAUTENKRANZ, C. TARA
STREET ADDRESS 216 E LAKE WORTH AVE
CITY-ST-ZIP LANTANA FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☒ Change ☐ Addition
3441 SE Micanopy Terr.
Stuart, FL 34997

☐ Change ☐ Addition

☐ Change ☒ Addition
STD
Rautenkranz, Laurence R.
2748 NE Cold Springs Dr.
Jensen Beach, FL 34957

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

4/16/96

CR2E034 (12/95)