


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000024744
1. Entity Name
CAMELOT APARTMENTS, LLC



Principal Place of Business 9150 S.W. 87TH AVENUE, SUITE #205 MIAMI, FL 33176	Mailing Address 9150 S.W. 87TH AVENUE, SUITE #205 MIAMI, FL 33176
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01092006No Chg-LLC. CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0813398	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENFIELD, ALAN E ESQ.
15105 NW 77TH AVENUE, SUITE 303
MIAMI LAKES, FL 33014

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MIAMI MANAGEMENT ASSOCIATES, LLC 9150 SW 87TH AVENUE SUITE #205 MIAMI, FL 33176
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IN THIS SPACE**

01/23/06-80024-017 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE:  1/19/06 305-595-1518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #