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**Mar 31, 1999 8:00 am**  
**Secretary of State**

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 579359

1. Corporation Name  
 CAMELOT R.V. PARK, INC.



Principal Place of Business

MALABAR, FL  
 1600 US #1  
 MALABAR FL 32950  
 US

Mailing Address

1600 U S HWY 1  
 P O BOX 500205  
 MALABAR FL 32950

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1978

4. FEI Number  
 59-1838219

Applied For  
 Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

29 Country

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 owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

RITTER, ROBERT J.  
 1630 US HWY 1  
 PO BOX 205  
 MALABAR FL 32950

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME DS  
 RITTER, JOHN M  
 STREET ADDRESS 102 BOUGAN VILLIEA  
 CITY-ST-ZIP ROCKLEDGE FL 32955

TITLE  DELETE

NAME D  
 RITTER, ROBERT J.  
 STREET ADDRESS 1630 US HWY 1  
 CITY-ST-ZIP MALABAR FL 32950

TITLE  DELETE

NAME DP  
 RITTER, ROBERT J. JR  
 STREET ADDRESS 1600 U S HWY 1  
 CITY-ST-ZIP MALABAR, FL 00000 32950

TITLE  DELETE

NAME D  
 RITTER, MARTHA M.  
 STREET ADDRESS 2960 ORANGE AVE  
 CITY-ST-ZIP MALABAR FL 32950

TITLE  DELETE

NAME D  
 RITTER, MARTHA ELIZABE  
 STREET ADDRESS 7432 SW 53 CT  
 CITY-ST-ZIP MIAMI FL 33143

TITLE  DELETE

NAME T  
 RITTER ELIZABETH BINA  
 STREET ADDRESS 1600 US HWY 1  
 CITY-ST-ZIP MALABAR FL 32950

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME  
 1.3 STREET ADDRESS 2554 N. Palm Drive  
 1.4 CITY-ST-ZIP Cocoa, FL 32926

2.1 TITLE  Change  Addition

2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

*Robert J. Ritter* **ROBERT J. Ritter** 3/26/99 1-407-7245396  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)