


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 19, 2008 8:00 am**  
**Secretary of State**

01-31-2008 90015 026 \*\*\*\*\*8.75  
 03-19-2008 90020 010 \*\*\*\*\*61.25

<b>DOCUMENT # 722267</b>					
1. Entity Name <b>CASTLE # 6 CONDOMINIUM, INC.</b>					
Principal Place of Business <b>4841 N. W. 22ND COURT LAUDERHILL FL 33313-3409</b>			Mailing Address <b>4841 N. W. 22ND COURT LAUDERHILL FL 33313-3409</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-1402602</b>	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Applied For		Not Applicable			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SHANKMAN, DEVERA 4841 N.W. 22 CT. LAUDERHILL FL 33133</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State <b>FL</b> Zip Code		
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 <i>Devera Shankman</i>		<i>X Devera Shankman</i>		DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	BOARD MEMBER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUESNEL, PAULINE		NAME		
STREET ADDRESS	4841 NW 22ND CT.		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBER, IRMA		NAME		
STREET ADDRESS	4841 NW 22ND CT		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WITKIN, MARLENE		NAME		
STREET ADDRESS	4841 NW 22ND COURT		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYNCH, ELAINE D		NAME		
STREET ADDRESS	4841 NW 22ND CT.		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALEY, PAUL		NAME		
STREET ADDRESS	4841 N WEST 22ND CT		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHANKMAN, DEVERA		NAME		
STREET ADDRESS	4841 N WEST 22ND CT		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Irma L. Weber Treas.</i>		DATE			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE			

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1st MOORE CR2E037 (10/07)