

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J33799

FILED
Apr 27, 2009
Secretary of State

Entity Name: CASTLE PROPERTY SERVICES INC.

Current Principal Place of Business:

1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751

New Principal Place of Business:

1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751 US

Current Mailing Address:

1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751

New Mailing Address:

1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751 US

FEI Number: 59-2866545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURT, RALPH A II
1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

BURT II, RALPH A PD
1081 N. LK. SYBELIA DRIVE
MAITLAND, FL 32751 US

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.

SIGNATURE: RALPH A. BURT II

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURT, RALPH A II
Address: 1081 N. LK. SYBELIA DR.
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: BURT, SANDRA W
Address: 1081 N. LK. SYBELIA DR.
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURT II, RALPH A PD
Address: 1081 N. LK. SYBELIA DR.
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RALPH A. BURT II

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date