

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099860

**FILED**  
**Apr 23, 2004**  
**Secretary of State**

**Entity Name:** CASTLEROCK HOME IMPROVEMENTS, INC.

**Current Principal Place of Business:**

3259 FOX CHASE CIRCLE NORTH  
#208  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

3259 FOX CHASE CIRCLE NORTH  
#208  
PALM HARBOR, FL 34683

**New Mailing Address:**

**FEI Number:** 59-3685550      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVIN MORRISON  
3259 FOX CHASE CIRCLE NORTH #208  
PALM HARBOR, FL 34683

**Name and Address of New Registered Agent:**

KEVIN MORRISON  
3259 FOX CHASE CIRCLE NORTH #208  
PALM HARBOR, FL 34683

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: KEVIN MORRISON

04/23/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MORRISON, KEVIN D  
Address: 8704 BEAVER LANE  
City-St-Zip: PORT RICHEY, FL 34668

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEVIN MORRISON

PRES

04/23/2004

Electronic Signature of Signing Officer or Director

Date