

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026913

FILED
Sep 05, 2008
Secretary of State

Entity Name: CASTELLON CARPENTRY, INC.

Current Principal Place of Business:

3910 34TH ST SW
LEHIGH ACRES, FL 33971

New Principal Place of Business:

3404 34TH ST SW
LEHIGH ACRES, FL 33976

Current Mailing Address:

3910 34 TH ST SW
LEHIGH ACRES, FL 33971

New Mailing Address:

3404 34 TH ST SW
LEHIGH ACRES, FL 33976

FEI Number: 20-0716901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTELLON, ALBERTO D
3910 34TH ST SW
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

CASTELLON, ALBERTO D
3404 34TH ST SW
LEHIGH ACRES, FL 33976 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: _____

09/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASTELLON, ALBERTO D
Address: 3910 34TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VD () Delete
Name: CASTELLON, ROSAMARIE
Address: 3910 34 ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: TD () Delete
Name: JACKSON, PEDRO
Address: 3910 34TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CASTELLON, ALBERTO D
Address: 3404 34TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: VD (X) Change () Addition
Name: CASTELLON, ROSAMARIE
Address: 3404 34 TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: TD (X) Change () Addition
Name: JACKSON, PEDRO
Address: 3404 34TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33976

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: ROSAMARIE CASTELLON

VD

09/05/2008

Electronic Signature of Signing Officer or Director

Date