

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000082776

**FILED**  
**Sep 04, 2008**  
**Secretary of State**

**Entity Name:** CASTLE RENTALS & PROPERTY MANAGEMENT, INC.

**Current Principal Place of Business:**

18550 LYNN RD.  
N. FT. MYERS, FL 33917

**New Principal Place of Business:**

1206 PONDELLA CIRCLE  
N. FT. MYERS, FL 33903

**Current Mailing Address:**

18550 LYNN RD.  
N. FT. MYERS, FL 33917

**New Mailing Address:**

1206 PONDELLA CIRCLE  
N. FT. MYERS, FL 33903

**FEI Number:** 56-2462625      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GIACALONE, ALBERT  
18550 LYNN RD.  
N. FT. MYERS, FL 33917      US

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

GIACALONE, ALBERT J III  
18550 LYNN RD.  
N. FT. MYERS, FL 33917      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: ALBERT GIACALONE III      09/04/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GIACALONE, ALBERT  
Address: 18550 LYNN RD.  
City-St-Zip: N. FT. MYERS, FL 33917

Title: D      ( ) Delete  
Name: BRIGGS, MARION  
Address: 1206 PONDELLA CIR  
City-St-Zip: N. FT. MYERS, FL 33903

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

Title: P      (X) Change ( ) Addition  
Name: GIACALONE, ALBERT J III  
Address: 18550 LYNN RD.  
City-St-Zip: N. FT. MYERS, FL 33917

Title: D      (X) Change ( ) Addition  
Name: GIACALONE, ALBERT J IV  
Address: 18550 LYNN RD  
City-St-Zip: N. FT. MYERS, FL 33917

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: ALBERT GIACALONE III      P      09/04/2008  
Electronic Signature of Signing Officer or Director      Date