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Feb 24, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000050548

1. Corporation Name
CASTLE PROPERTY SERVICES GROUP, INC.

Principal Place of Business: 4450 WEST SUNRISE BLVD. SUITE 100 PLANTATION FL 33313
Mailing Address: 4450 WEST SUNRISE BLVD. SUITE 100 PLANTATION FL 33313



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/09/1997
4. FEI Number: 65-0770205
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business (21-23)
2a. Mailing Address (26-28)
24. Zip (25)
29. Country (30)

9. Name and Address of Current Registered Agent: BLATTNER, DAVID K, 200 EAST BROWARD BLVD., 15TH FLOOR, FT. LAUDERDALE FL 33302
10. Name and Address of New Registered Agent (81-85)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	DELETABLE	1.1 TITLE	Change Addition
NAME: DONNELLY, JAMES		1.2 NAME	
STREET ADDRESS: 2544 EAGLE RUN DR		1.3 STREET ADDRESS	
CITY-ST-ZIP: FT LAUDERDALE FL		1.4 CITY-ST-ZIP	
TITLE: STD	DELETABLE	2.1 TITLE	Change Addition
NAME: BAUGHAN, CRAIG		2.2 NAME	VPSTD VAUGHAN, CRAIG.
STREET ADDRESS: 4450 W SUNRISE BLVD STE 100		2.3 STREET ADDRESS	
CITY-ST-ZIP: PLANTATION FL 33313		2.4 CITY-ST-ZIP	
TITLE: VP	DELETABLE	3.1 TITLE	Change Addition
NAME: STERNBACH, GIL		3.2 NAME	
STREET ADDRESS: 4935 KENSINGTON CIR		3.3 STREET ADDRESS	
CITY-ST-ZIP: CORAL SPRINGS FL 33076		3.4 CITY-ST-ZIP	
TITLE: VP	DELETABLE	4.1 TITLE	Change Addition
NAME: DONNELLY, ROBERT		4.2 NAME	
STREET ADDRESS: 4450 WEST SUNRISE BLVD. #100		4.3 STREET ADDRESS	
CITY-ST-ZIP: PLANTATION FL 33313		4.4 CITY-ST-ZIP	
TITLE: [Blank]	DELETABLE	5.1 TITLE	Change Addition
NAME: [Blank]		5.2 NAME	
STREET ADDRESS: [Blank]		5.3 STREET ADDRESS	
CITY-ST-ZIP: [Blank]		5.4 CITY-ST-ZIP	
TITLE: [Blank]	DELETABLE	6.1 TITLE	Change Addition
NAME: [Blank]		6.2 NAME	
STREET ADDRESS: [Blank]		6.3 STREET ADDRESS	
CITY-ST-ZIP: [Blank]		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE REQUIRED Date: Jan 9/99 Daytime Phone # _____

CR2E034 (1/98)