2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726211

Entity Name: CASTLE #12 CONDOMINIUM, INC.

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Current Principal Place of Business:

C/O BENCHMARK PROPERTY MGMT.

7932 WILES ROAD

CORAL SPRINGS, FL 33067

Current Mailing Address:

C/O BENCHMARK PROPERTY MGMT. 7932 WILES ROAD

CORAL SPRINGS, FL 33067 US

FEI Number: 59-1499153 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BASULTO ROBBINS AND ASSOCIATES, LLP 14160 NW 77 COURT STE. 22

MIAMI LAKES, FL 33016 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: RUSSELL M. ROBBINS, ESQ. 04/14/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title D

Name DUNNE, JOHN Name QUESNEL, ROBERT

Address 4751 NW 21 STREET #104 Address 4751 NW 21 STREET #610

City-State-Zip: LAUDERHILL FL 33312 City-State-Zip: LAUDERHILL FL 33313

Title P Title S

Name THOMPSON, SHARON Name LAGACE, JOANNE

Address 4751 NW 21 STREET #509 Address 4751 NW 21 STREET #317

City-State-Zip: LAUDERHILL FL 33313 City-State-Zip: LAUDERHILL FL 33313

Title T Title [

Name VILLENEUVE, GAETAN Name SALAME, SUMRA

Address 4751 NW 21 STREET #217 Address 4751 NW 21 STREET #305

City-State-Zip: LAUDERHILL FL 33313 City-State-Zip: LAUDERHILL FL 33313

Title D

Name CADY, BARBARA

Address 4751 NW 21 STREET #406 City-State-Zip: LAUDERHILL FL 33313

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON THOMPSON P

Electronic Signature of Signing Officer/Director Detail

Date

04/14/2022

FILED Apr 14, 2022

Secretary of State

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