

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000131465

**Entity Name:** CASTLE LANDSCAPE, INC.

**Current Principal Place of Business:**

12270 SW 3RD STREET  
SUITE 200  
PLANTATION, FL 33325

**Current Mailing Address:**

PO BOX 559009  
FT LAUDERDALE , FL 33355 US

**FEI Number:** 26-1561952

**Certificate of Status Desired:** No

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

VAUGHAN, CRAIG  
12270 SW 3RD STREET  
SUITE 200  
PLANTATION, FL 33325 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name DONNELLY, CATHY  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title VP/S/T  
Name VAUGHAN, CRAIG  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title VP  
Name DONNELLY, ROBERT A  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

Title VP  
Name DONNELLY, PATRICK J  
Address 12270 SW 3RD STREET  
City-State-Zip: PLANTATION FL 33325

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

**SIGNATURE:** CRAIG VAUGHAN

**SECRETARY**

**02/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date