

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000081316

Entity Name: CAROLINA CASTELLON CO.**Current Principal Place of Business:**101 MARKETSIDE AVE 404-220
PONTE VEDRA, FL 32081**Current Mailing Address:**101 MARKETSIDE AVE 404-220
PONTE VEDRA, FL 32081 US**FEI Number:** 47-1999697**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTELLON, CAROLINA D
101 MARKETSIDE AVE 404-220
PONTE VEDRA, FL 32081 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	CASTELLON, CAROLINA D
Address	101 MARKETSIDE AVE 404-220
City-State-Zip:	PONTE VEDRA FL 32081

Title	VP
Name	CASTELLON, CAROLINA D
Address	101 MARKETSIDE AVE 404-220
City-State-Zip:	PONTE VEDRA FL 32081

Title	TREA
Name	CASTELLON, CAROLINA D
Address	101 MARKETSIDE AVE 404-220
City-State-Zip:	PONTE VEDRA FL 32081

Title	SEC
Name	CASTELLON, CAROLINA D
Address	101 MARKETSIDE AVE 404-220
City-State-Zip:	PONTE VEDRA FL 32081

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: CAROLINA D CASTELLON**PRESIDENT****03/27/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date