

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000119183

Entity Name: CASTLE RE LLC

Current Principal Place of Business:

3221 SW WINDING WAY
PALM CITY, FL 34990

Current Mailing Address:

3221 SW WINDING WAY
PALM CITY, FL 34990 US

FEI Number: 47-4495810

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TURNBULL, W.SCOTT ESQ
759 SW FEDERAL HWY
STE 106
STUART, FL 34994 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

Authorized Person(s) Detail :

Title AMBR
Name CRAWFORD, LAURA K
Address 3221 SW WINDING WAY
City-State-Zip: PALM CITY FL 34990

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA K. CRAWFORD

AMBR

06/07/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date