

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000011592

**Entity Name:** LITTLE CASTLE PROPERTY MANAGEMENT LLC

**Current Principal Place of Business:**

801 SE JOHNSON AVE  
2667  
STUART, FL 34995

**Current Mailing Address:**

801 SE JOHNSON AVE  
2667  
STUART, FL 34995 US

**FEI Number:** 81-5041798

**Certificate of Status Desired:** No

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

WILDE, LEON P  
969 SE FEDERAL HWY  
SUITE 400  
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 LEON, FRANCISCO  
Address 801 SE JOHNSON AVE #2667  
City-State-Zip: STUART FL 34995

Title AMBR  
Name LEON, RHONDA  
Address 801 SE JOHNSON AVE #2667  
City-State-Zip: STUART FL 34995

*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:** RHONDA LEON

AMBR

01/18/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date