

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720752

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: CASTLE #4 CONDOMINIUM, INC.

**Current Principal Place of Business:**

4801 N. W. 22ND COURT  
LAUDERHILL, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

4801 N. W. 22ND COURT  
LAUDERHILL, FL 33313

**New Mailing Address:**

FEI Number: 59-1402609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HENDERSON, SANDRA  
4801 N W 22 CT  
LAUDERHILL, FL 33313 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HENDERSON, SANDRA  
Address: 4801 NW 22 CT  
City-St-Zip: LAUDERHILL, FL 33313

Title: VD ( ) Delete  
Name: ROBIN, EDMOND  
Address: 4801 NW 22 CT  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D ( ) Delete  
Name: BADGER, GENEVA  
Address: 4801 NW 22 CT  
City-St-Zip: LAUDERHILL, FL 33313

Title: SD ( ) Delete  
Name: REED, GEANETHA  
Address: 4801 NW 22ND COURT  
City-St-Zip: LAUDERHILL, FL 33313

Title: TD ( ) Delete  
Name: KANNER, MARLENE  
Address: 4801 NW 22ND CT  
City-St-Zip: LAUDERHILL, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SANDRA LEVY

P

04/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date