

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727281

FILED
Mar 07, 2011
Secretary of State

Entity Name: CASTLE #14 CONDOMINIUM, INC.

Current Principal Place of Business:

C/O BERCHMARK PROPERTY MGMT
7932 WILES RD
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

C/O BERCHMARK PROPERTY MGMT
7932 WILES RD
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 59-1500304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYE & BENDER, P.L.
1200 PARK CENTRAL BLVD., SOUTH
POMPANO BEACH, FL 33064 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: T
Name: LEWIS, PAUL
Address: 4851 NW 21ST. ST. #506
City-St-Zip: LAUDERHILL, FL 33313

Title: VP1
Name: JACKSON, SYLVESTER
Address: 4851 NW 21ST APT. 316
City-St-Zip: LAUDERHILL, FL 33313

Title: S
Name: JULIEN, SANDRA
Address: 4851 NW 21 ST APT. 300
City-St-Zip: LAUDERHILL, FL 33313

Title: VP2
Name: RASDALL, WALTER
Address: 4851 NW 21 ST APT. 516
City-St-Zip: LAUDERHILL, FL 33313

Title: PD
Name: ALTER, SANDY
Address: 4851 NW 21 ST #312
City-St-Zip: LAUDERHILL, FL 33313

Title: S
Name: MOORE VELEZ, WENDOLINA
Address: 4857 NW 21 STREET, #507
City-St-Zip: LAUDERHILL, FL 33313

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

SIGNATURE: SANDY ALTER

P

03/07/2011

Electronic Signature of Signing Officer or Director

Date

Code	504				Options	
Name	Faubert, J. Claude 504		Applicant		Ledger	
E-Mail/			Property	C14	Unpaid Chg	
Address	170 Rue Henri-Bourassa		Unit	504	Recur Chg	
	Papineauville		Status	Current	2nd Page	
City-State-Zip	Canada	JOV 1RO				Fee Incr.
Home	(954) 733-3604 Ext()		Late Fee		Move In	
Office	(819) 427-9567 Ext()		Grace period 6 days		Move Out	
FAX	() Ext()				Roommates	
Fees	255.00	Due Day	1	Base fee	% Owed tot	
Move In	//	Lease From	//	*	0.0000	
Move Out	//	Lease To	//	\$/day	0.00	
Paid To	//	Notice Date	//			
Deposit						Save
Deposit	0.00	Last Month	0.00	Cancel		
Key	0.00	Interest	0.00			
Pet	0.00					
				New	Delete	

add as VP
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