

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001154

Entity Name: CASTLE RESEARCH, INC.

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

30424 POINCIANA ROAD  
BIG PINE KEY, FL 33043

**New Principal Place of Business:**

30424 POINCIANA ROAD  
BIG PINE KEY, FL 33043 US

**Current Mailing Address:**

30424 POINCIANA ROAD  
BIG PINE KEY, FL 33043

**New Mailing Address:**

30424 POINCIANA ROAD  
BIG PINE KEY, FL 33043 US

FEI Number: 95-4844948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORELL, MICHAEL  
30424 POINCIANA ROAD  
BIG PINE KEY, FL 33043 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: PCEO  
Name: SCHARMANN, DOUGLAS  
Address: 30424 POINCIANA ROAD  
City-St-Zip: BIG PINE KEY, FL 33043

Title: SCFO  
Name: NORELL, MICHAEL  
Address: 30424 POINCIANA ROAD  
City-St-Zip: BIG PINE KEY, FL 33043

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: MICHAEL NORELL

SCFO

04/24/2012

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

\_\_\_\_\_  
Date