

FILED
Jun 05, 2002 8:00 am
Secretary of State

05-12-2002 90589 030 ****50.00

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000002359

1. Entity Name

CASTLES ON THE GREEN, LLC

54606

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

219 NORTH DIXIE HIGHWAY
Suite, Apt. #, etc.

3. Mailing Address

219 N. DIXIE HIGHWAY
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

LAKE WORTH, FL

City & State

LAKE WORTH, FL

4. FEI Number

65-1084755

Applied For

Not Applicable

Zip

33460

Country

USA

Zip

33460

Country

USA

5. Certificate of Status Desired ☐\$5.00 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

JAMES F. MILLER

Street Address (P.O. Box Number is Not Acceptable)

219 N. DIXIE HIGHWAY

City

LAKE WORTH

FL

Zip 33460

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEES \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	REGISTERED AGENT
NAME	JAMES F. MILLER
STREET ADDRESS	219 N. DIXIE HIGHWAY
CITY-ST-ZIP	LAKE WORTH, FL 33460

TITLE	PRINCIPAL
NAME	JAMES F. MILLER
STREET ADDRESS	219 N. DIXIE HIGHWAY
CITY-ST-ZIP	LAKE WORTH, FL 33460

TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-29-02

Date

561-547-1932

Daytime Phone #

CR2E0838 (12/01)