2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 09, 2004 08:00 AM Secretary of State

	ANNU	AL REPORT		Secretary of State
DOCUMENT # L01000011215				Secretary of State
1. Entity Name CASTLES CONSTRUCTION AND DEVELOPMENT, LLC				
Principal Place of Business Mailing Address 219 N DIXIE HWY LAKE WORTH, FL 33460 LAKE WORTH, FL 33460			- - 	
D		TE IN THIS SPA	ICE	01082004 No Chg-LLC
6. Name and Address of Current Registered Agent MILLER, JAMES F 16950 JOG RD STE 102 LAKE WORTH, FL 33460				DO NOT WRITE IN THIS SPACE
	named entity submits this statemitions of registered agent.	ant for the purpose of changing its regist	ered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE, Regis	joued ydaus eithus mar redning	DATE DATE
Filing Fee is \$50.00 Due by May 1, 2004				U00000082438
9.	MANAGING M	EMBERS/MANAGERS		
TITLE NAME STREET ADORESS CITY ST-ZIP	P MILLER, JAMES F 219 N DIXIE HWY LAKE WORTH, FL 33460			
TITLE NAME STREET ADDRESS CITY ST-ZIP				
TITLE NAME STREET ADORESS GITY-SI-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		L 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

3-5-04