

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 16, 2009  
Secretary of State**

DOCUMENT# L05000026290

Entity Name: PINE CASTLE, LLC

**Current Principal Place of Business:**

2372 NORTHUMBRIA DRIVE  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 951382  
LAKE MARY, FL 32795

**New Mailing Address:**

FEI Number: 73-1705438      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MANJI, SHABBIR F  
2372 NORTHUMBRIA DRIVE  
SANFORD, FL 32771    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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: MANJI, SHABBIR F  
Address: 2372 NORTHUMBRIA DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: MGR      ( ) Delete  
Name: MANJI, ZUHER F  
Address: 1693 PINE BAY DR  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic 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: SHABBIR MANJI

MGR

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date