

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064236

Entity Name: CASTLESPIE, LLC

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

4110 LAKEVIEW DR  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

4110 LAKEVIEW DR  
SEBRING, FL 33870

**New Mailing Address:**

FEI Number: 20-4135361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LACSON, AGUSTIN J MGMR  
4110 LAKEVIEW DR  
SEBRING, FL 33870 US

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

LACSON, J. AGUSTIN MGMR  
4110 LAKEVIEW DR  
SEBRING, FL 33870 US

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: J. AGUSTIN LACSON

04/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LACSON, J. AUGUSTIN  
Address: 4110 LAKEVIEW DR  
City-St-Zip: SEBRING, FL 33870

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: J AGUSTIN LACSON

MGR

04/18/2007

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