

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90231 049 ***138.75

DOCUMENT # L05000068713

1. Entity Name

CASTRO FIVE STAR INVESTMENTS LLC



Principal Place of Business

**95 FOREST AVEUE
LOCUST VALLEY, NY 11560**

Mailing Address

**95 FOREST AVEUE
LOCUST VALLEY, NY 11560**

60016407



DO NOT WRITE IN THIS SPACE

01252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

20-3202115

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GRANET, LLOYD P.A.
2295 NW COROPRATE BLVD., SUIT 235
BOCA RATON, FL 33431-7330**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
KEOGH, TERRI A
95 FOREST AVE
LOCUST VALLEY, NY 11560**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, OR AUTHORIZED REPRESENTATIVE

3/11/08
Date

516-636-3100
Daytime Phone #