

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009407

FILED
Feb 04, 2007
Secretary of State

Entity Name: CASTLE CARE LLC

Current Principal Place of Business:

12381 S CLEVELAND AVE
SUITE 108
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1299 BILTMORE DR
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-4189902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, MEL
1299 BILTMORE DR
FORT MYERS, FL 33901 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: PRES () Delete
Name: BERES, RANDY K
Address: 13230 IDYLWILD RD
City-St-Zip: FORT MYERS, FL 33905

Title: VP () Delete
Name: KING, MEL
Address: 1299 BILTMORE DR
City-St-Zip: FORT MYERS, FL 33901

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 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: MEL KING

VP

02/04/2007

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