

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000019731

**Entity Name:** CASTLE OHKE WATER, LLC

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20929 SKYLER DRIVE  
N FORT MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

20929 SKYLER DRIVE  
N FORT MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 27-1933505

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTLE, MELVIN  
20929 SKYLER DRIVE  
N FORT MYERS, FL 33917 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:** MGRM  
**Name:** CASTLE, MELVIN  
**Address:** 20929 SKYLER DRIVE  
**City-St-Zip:** N FORT MYERS, FL 33917

**Title:** MGR  
**Name:** CASTLE, SANDRA  
**Address:** 20929 SKYLER DRIVE  
**City-St-Zip:** N FORT MYERS, FL 33917

I hereby 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: MELVIN CASTLE

MGRM

04/19/2012

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