

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089828

FILED
Mar 24, 2009
Secretary of State

Entity Name: SANDCASTLE COMMUNITY MANAGEMENT, INC.

Current Principal Place of Business:

1719 TRADE CENTER WAY #4
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

PO BOX 8478
NAPLES, FL 341018478

New Mailing Address:

FEI Number: 65-1139084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE ARMAS, MARIA LUISA
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEARMAS, MARIALUISA
Address: 12901 BRYNWOOD WAY
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: WINKLER, NANCY
Address: 2847 46TH ST. SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA LUISA DE ARMAS

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date