2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000077392

Title:

Name:

Address:

City-St-Zip:

FILED Dec 07, 2005 Secretary of State

Entity Name: FLORIDA CASTLE BUILDERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 944 KERWOOD CIRCLE OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 944 KERWOOD CIRCLE OVIEDO, FL 32765 FEI Number: 41-2102756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAVARO, ALEXANDER NAVARO, ALEXANDER 944 KERNDOOR CIR 944 KERWOOD CIR US OVIEDO, FL 32765 OVIEDO, FL 32765 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: 12/07/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NAVARRO, ALEXANDER Name: Name: 944 KERWOOD CIRCLE Address: Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: HERROLD, DOUG Name: 1107 SUPERIOR COURT Address: Address: WINTER SPRINGS, FL 32708 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition RICOY, CARLOS F Name: Name: 670 PINE AVE Address: Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: () Delete Title: () Change () Addition RUSH, JASON Name: Name: Address: 1151 HOLLOW PINE DR Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

ΕO

RICOY, JUAN

1261 RISING SUN BLVD.

WINTER SPRINGS, FL 32708

() Change (X) Addition

Ρ SIGNATURE: DOUG HERROLD 12/07/2005

() Delete