

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 08:00 A
Secretary of State

DOCUMENT # P05000053359
 1. Entity Name
 CASTAWAY'S PROPERTIES, INC.



Principal Place of Business Mailing Address
 1453 S BELCHER RD 1453 S BELCHER RD
 CLEARWATER, FL 33764 CLEARWATER, FL 33764

DO NOT WRITE IN THIS SPACE



03042008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 20-2661102 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NOLAN, MELISSA
 1453 S BELCHER RD
 CLEARWATER, FL 33764

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	NOLAN, MELISSA
STREET ADDRESS	1453 S BELCHER RD
CITY - ST - ZIP	CLEARWATER, FL 33764
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 03/25/08-80010-025 150.00

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Melissa Nolan Melissa Nolan 3/5/08 (427) 744-3864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #