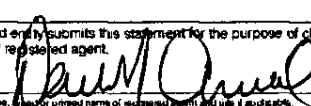
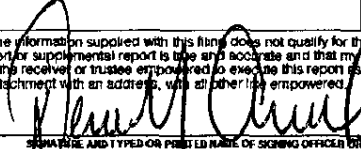


FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91300 045 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000017968			
1. Entity Name CAST STONE WORKS, INC.			
Principal Place of Business 4610 ENTERPRISE AVE NAPLES, FL 34104 US		Mailing Address 4610 ENTERPRISE AVE NAPLES, FL 34104 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0562253		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOGOK, WILLIAM A 601 99TH AVE N NAPLES, FL 34108		7. Name and Address of New Registered Agent Name DEREK J ARNOLD Street Address (P.O. Box Number is Not Acceptable) 1013 TIVOLI CT City NAPLES, FLORIDA FL Zip Code 34104	
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  PRESIDENT DATE 04/23/03 Signature of officer or principal named name of registered agent and use if applicable. (NOTE: Registered Agent's signature required when submitting.)			
9. Election Campaign Financing Trust Fund Contribution. ☐		5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARNOLD, DEREK 1013 TIVOLI COURT NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOGOK, WILLIAM A 601 99TH AVENUE N NAPLES, FL 34108 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KOGOK, JEAN L 601 99TH AVENUE N NAPLES, FL 34108 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARNOLD, JOAN E 6887 RED BAY PARK ROAD NAPLES, FL 34109 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition V.P./T.I.S. AGENT GARY COLEMAN 3705 BAY CREEK DRIVE BONITA SPRING FL 34134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information disclosed 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 another line empowered.			
SIGNATURE:  PRESIDENT		Date 4/23/03 Phone 239-821-5097	

DEREK J ARNOLD

CR2E034 (10/02)