2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000054101

1. Entity Name

CASTLE CAPITAL CORP.



FILED Apr 15, 2008 08:00 A Secretary of State

Principal Place of Business

475 CENTRAL AVENUE THE KRESS BUILDING, SUITE 202 ST. PETERSBURG, FL 33701 US Mailing Address

C/O ERNEST L. MASCARA, P.A. 475 CENTRAL AVENUE, SUITE 202 ST. PETERSBURG, FL 33701 US



DO NOT WRITE IN THIS SPACE

 04142008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MASCARA, ERNEST L THE KRESS BUILDING, SUITE 202 475 CENTRAL AVENUE ST. PETERSBURG, FL 33701

SIGNATURE:

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					
Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agenture required when revisitating) OATE					
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PSTD BALL, RONALD W 475 CENTRAL AVENUE, SUITE 202 ST. PETERSBURG, FL 33701				U00000898418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MASCARA, ERNEST L 475 CENTRAL AVENUE, SUITE 202 ST PETERSBURG, FL 33701				04/25/09-80087-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
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.					

ME OF SIGNING OFFICER OR DIRECTOR