

2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 SEP 11 AM 9:13

DOCUMENT # P98000086684					
1. Entity Name LITTLE CASTLES OF SANIBEL, INC.					
Principal Place of Business 4760 RUE HELENE SANIBEL, FL 33957			Mailing Address 4760 RUE HELENE SANIBEL, FL 33957		
2. Principal Place of Business - No P.O. Box # 6086 CASTAWAYS LANE			3. Mailing Address 6086 CASTAWAYS LANE		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State SANIBEL, FL			City & State SANIBEL, FL		
Zip 33957		Country USA		Zip 33957	
Country USA		4. FE Number 59-3544164			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Approved For Not Applicable	
6. Name and Address of Current Registered Agent MURTY, TIMOTHY J. 1633 PERIWINKLE WAY, STE. A SANIBEL, FL 33957			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS					
TITLE	DP	☐ Delete			
NAME	CASTELLITTO, DONALD J				
STREET ADDRESS	1 NORTH AVE.				
CITY-STATE-ZIP	MONTVALE, NJ 07645				
TITLE	DV	☐ Delete			
NAME	CASTALDO, JOHN E				
STREET ADDRESS	4760 RUE HELENE				
CITY-STATE-ZIP	SANIBEL, FL 33957				
TITLE	DST	☐ Delete			
NAME	CASTELLITTO, GLORIA A				
STREET ADDRESS	1 NORTH AVE.				
CITY-STATE-ZIP	MONTVALE, NJ 07645				
TITLE	D	☐ Delete			
NAME	CASTALDO, LAURIE A				
STREET ADDRESS	4760 RUE HELENE				
CITY-STATE-ZIP	SANIBEL, FL 33957				
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY-STATE-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	6086 CASTAWAYS LANE				
STREET ADDRESS	SANIBEL, FL 33957				
CITY-STATE-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	16070 WATERLOAF LANE				
STREET ADDRESS	FT. MYERS, FL 33908				
CITY-STATE-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	6086 CASTAWAYS LANE				
STREET ADDRESS	SANIBEL, FL 33957				
CITY-STATE-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	16070 WATERLOAF LANE				
STREET ADDRESS	FT. MYERS, FL 33908				
CITY-STATE-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	500135691295				
STREET ADDRESS	09/11/08--01039--002				
CITY-STATE-ZIP	***300.00				
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-STATE-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.					
SIGNATURE: Donald Castellitto 9/8/2008					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					