

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Page 1 of 2

CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUL 24 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100006854861--8

-08/01/02--01047--009

****300.00 ****300.00

DOCUMENT # P99000078174

1. Corporation Name

Castle Rock Construction of Naples, Inc.
10911 Bonita Beach Rd Ane Haven #2081
Bonita Springs, FL 34135

2. Principal Office Address

1609 Bluepoint Ave

Suite, Apt. #, etc.

3. Mailing Office Address

10911 Bonita Beach Rd

Suite, Apt. #, etc.

City & State

Naples, FL

Zip

34102

Country

USA

City & State

Bonita Springs, FL

Zip

34135

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

9-1-99

5. FEI Number

59-3596553

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ENLOW, Keola

Street Address (P.O. Box Number is Not Acceptable)

1609 Bluepoint Ave

Suite, Apt. #, Etc.

City

Naples,

State

FL

Zip Code

34102

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Keola ENLOW	1609 Bluepoint Ave	Naples, FL 34102
		01-02 UBR	78

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

[Signature] Keola ENLOW

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

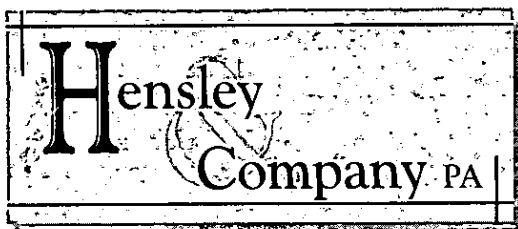
7/16/02

Date

239-992-6060

Daytime Phone #

CR2E081 (9/01)



page 2 of 2



The CPA. Never Underestimate The Value.®
American Institute of Certified Public Accountants
Florida Institute of Certified Public Accountants

Certified Public Accountants

Thursday, February 14, 2002

- Business & Personal Tax & Accounting
- Mortgages- Residential, SBA, Commercial

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Castlerock Construction of Naples, Inc.
1609 Bluepoint Ave
Naples, FL 34102

FEI: #593596553
DOC. # P99000078174

Dear Sirs:

Please find my client's check for \$300.00 covering 2001 and 2002., and their reinstatement application. Castlerock Construction of Naples moved to another address and never received the original report. Please waive the penalty and reinstate the corporation.

Thank you,

Respectfully,

A handwritten signature in dark ink, appearing to be 'K. Carey', is written over the word 'Respectfully,'.

Hensley & Company PA