2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P99000100403** CASTLEROCK BUILDERS, INC. Principal Place of Business Mailing Address 1227 S PATRICK DRIVE 1227 S PATRICK DRIVE SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip . Country_ Country

11.

TITLE

NAME

NAME

TITLE

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CITY-ST-ZIF

STREET ADDRESS

CITY-ST-ZIP

May 15, 2001 8:00 am Secretary of State

CASTLEROCK BUILDERS, INC.							(05-15-2001	90075	025 ***15	50.00
Principal Place of Business Mailing Address											
227 S PATRICK DRIVE ATELLITE BEACH FL 32937			1227 S PATRICK DRIVE SATELLITE BEACH FL 32937								
2. Principal	Place of Busines	3. Mailing Address	lailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			· ·	•	OO NOT WRITE			
City & State			City & State			4	4. FEI Number 59-3670434 Applied For				
Zip . Country			– Zip	try	5	. Certificate of Stat			\$8.75 Add		
	6 Name an	d Address of Current Re	enistered Agent				. Name and Addre	nee of Now Pr		Fee Require	ea
···	o. Hame an	a Address of Current Re	igistered Agent		Name		. Name and Addre	ss or New ne	gistered /	agent	
KLINGLESMITH, WILLIAM					Street Address (P.O. Box Number is Not Acceptable)						
403 HWY A1A #211 SATELLITE BEACH FL 32937											
OTTELLE BETOTT E GEOT					City	City FL Zip Code					
8. The above			he purpose of changing its					e State of Flor			
		rinted name of registered agent and				ure required whe	en reinstating)		DATE		.
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			550.00	10. Election C Trust Fund	Campaign Fina d Contribution.			0 May Be I to Fees
11.		OFFICERS AND DI	<u> </u>	12.			 ADDITIONS/CHANI	GES TO OFFIC	CERS AND	DIRECTOR	S IN 11
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NAME	JORGE, FRED)	L Delete	NAME						☐ Onlinge	Addition
STREET ADDRESS - CITY-ST-ZIP	805 CHEYENI MELBOURNE				ST-ZIP	•					
TITLE			☐ Delete	TITLE		460	ASURER	ORGE		☐ Change	Addition
name Street address	i F		~		T ADDRESS	76	PATTY J 305 CHE MELBOU	4ENNO	2 ST	; 2141	``
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13. 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 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 refleiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

TITLE NAME

STREET ADDRESS

SIGNATURE:

CR2E034 (10/00)