

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064236

Entity Name: CASTLESPIE, LLC

Current Principal Place of Business:

4110 LAKEVIEW DR
SEBRING, FL 33870

Current Mailing Address:

4110 LAKEVIEW DR
SEBRING, FL 33870

FEI Number: 20-4135361

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LACSON, J. AGUSTIN MGRM
4110 LAKEVIEW DR
SEBRING, FL 33870 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	LACSON, J. AUGUSTIN	Name	CROSKERY, JANICE
Address	4110 LAKEVIEW DR	Address	4110 LAKEVIEW DR
City-State-Zip:	SEBRING FL 33870	City-State-Zip:	SEBRING FL 33870

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANICE J CROSKERY

MANAGER

03/25/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date