

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000086092

Entity Name: CASTLE PARADISE LLC

Current Principal Place of Business:

6632 WILD ORCHID TRAIL
LAKE WORTH, FL 33449

Current Mailing Address:

6632 WILD ORCHID TRAIL
LAKE WORTH, FL 33449

FEI Number: 45-5575477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIDSON, MARIA T
6632 WILD ORCHID TRAIL
LAKE WORTH, FL 33449 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 MANAGER
Name DAVIDSON, MARIA T
Address 6632 WILD ORCHID TRAIL
City-State-Zip: LAKE WORTH FL 33449

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: MARIA TERESA DAVIDSON

MANAGER

04/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date