## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 729917** 

FILED Mar 23, 2009 Secretary of State

Entity Name: THE DOWNTOWNER, INC. **Current Principal Place of Business: New Principal Place of Business:** 229 NORTH K STREET LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 229 N K ST 229 NORTH K STREET LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 FEI Number: 59-1625567 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CONSTANTINE, MATT 229 NORTH K STREET, UNIT 201 LAKE WORTH, FL 33460 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CONSTANTINE, MATT Name: Name: Address: 229 NORTH K STREET, UNIT 201 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: Title: () Delete Title: () Change () Addition WEINSTOCK, MISSY Name: Name: Address: 229 NORTH K STREET, UNIT 205 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: Title: VD () Delete Title: (X) Change ( ) Addition COOMBE, THOMAS Name: COOMBE, THOMAS Name: 229 NORTH K STREET, UNIT 102 Address: 229 N. K STREET Address: City-St-Zip: LAKE WORTH, FL City-St-Zip: LAKE WORTH, FL Title: ( ) Delete Title: (X) Change ( ) Addition Name: COOMBE, THERESA Name: COOMBE, THERESA Address: 229 NO. K ST. #102 Address: 229 NORTH K STREET, UNIT102 City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THERESA COOMBE T 03/23/2009