

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076623

FILED
Jul 19, 2005
Secretary of State

Entity Name: DOWNTOWN CORNER, LLC

Current Principal Place of Business:

37071 MAIN STREET
CANAL POINT, FL 33438

New Principal Place of Business:

Current Mailing Address:

PO BOX 455
CANAL POINT, FL 33438

New Mailing Address:

PO BOX 833
CANAL POINT, FL 33438

FEI Number: 20-1778742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PADGETT, THOMAS H JR
36941 2ND STREET
CANAL POINT, FL 33438 US

Name and Address of New Registered Agent:

NASSEF, SETTOHOM A
36941 2ND STREET
CANAL POINT, FL 33438 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: SETTOHOM A. NASSEF

07/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PADGETT, THOMAS H JR
Address: 36941 2ND STREET
City-St-Zip: CANAL POINT, FL 33438

Title: MGR (X) Delete
Name: NASSEF, SETTOHOM A
Address: 36941 2ND STREET
City-St-Zip: CANAL POINT, FL 33438

Title: MGR (X) Delete
Name: PADGETT, SALLY S
Address: 36941 2ND STREET
City-St-Zip: CANAL POINT, FL 33438

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NASSEF, SETTOHOM A
Address: 36941 2ND STREET
City-St-Zip: CANAL POINT, FL 33438

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SETTOHOM A. NASSEF

MGR

07/19/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date