2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# L05000107769

Entity Name: DOWNEY, SCHARF AND WRIGHT, LLC

Current Principal Place of Business:

5562 S.W. 112 TERRACE
COOPER CITY, FL 33330

New Principal Place of Business:

Current Mailing Address:

5562 S.W. 112 TERRACE
COOPER CITY, FL 33330

New Mailing Address:

FEI Number: 20-3661168 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOWNEY, WILLIAM
5562 S.W. 112 TERRACE
COOPER CITY, FL 33330 US

Name and Address of New Registered Agent:

DOWNEY, WILLIAM F
5562 S.W. 112 TERRACE
COOPER CITY, FL 33330 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: WILLAIM DOWNEY 03/31/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: DOWNEY, WILLIAM
Address: 5562 S.W. 112 TERRACE
City-St-Zip: COOPER CITY, FL 33330

Title: MGRM ( ) Delete
Name: SCHARF, RANDOLPH
Address: 7460 PLANTATION ROAD
City-St-Zip: PLANTATION, FL 33317

Title: MGRM ( ) Delete
Name: WRIGHT, MARC
Address: 744 N.W. 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

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

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 exemption stated in Chapter 119, 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: WILLIAM DOWNEY PRES 03/31/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date