

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000021926

FILED  
Mar 03, 2008  
Secretary of State

Entity Name: THE DOWNTOWN FIRM, LLC

**Current Principal Place of Business:**

7150 CLEARWOOD ROAD  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

**Current Mailing Address:**

7150 CLEARWOOD ROAD  
PENSACOLA, FL 32526 US

**New Mailing Address:**

FEI Number: 20-8563133

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOFTIS, JOHN D  
7150 CLEARWOOD ROAD  
PENSACOLA, FL 32526 US

**Name and Address of New Registered Agent:**

LOFTIS, JOHN W  
7150 CLEARWOOD ROAD  
PENSACOLA, FL 32526 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: JOHN W. LOFTIS

03/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LOFTIS, JOHN D  
Address: 7150 CLEARWOOD RD  
City-St-Zip: PENSACOLA, FL 32526 US

Title: MGR ( ) Delete  
Name: WALKER, CRAIG D  
Address: 512 EVENTIDE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LOFTIS, JOHN W  
Address: 7150 CLEARWOOD RD  
City-St-Zip: PENSACOLA, FL 32526 US

Title: MGR (X) Change ( ) Addition  
Name: WALKER, CRAIG D  
Address: 4530 BOHEMIA DR.  
City-St-Zip: PENSACOLA, FL 32504 US

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: JOHN W. LOFTIS

MGR

03/03/2008

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