

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001401

FILED
Feb 22, 2009
Secretary of State

Entity Name: JOHN DOWNES BUILDING & REMODELING, INC.

Current Principal Place of Business:

12548 MOON LAKE CIRCLE
NEW PORT, FL 34654

New Principal Place of Business:

12548 MOON LAKE CIRCLE
NEW PORT RICHEY, FL 34654

Current Mailing Address:

12548 MOON LAKE CIRCLE
NEW PORT, FL 34654

New Mailing Address:

12548 MOON LAKE CIRCLE
NEW PORT RICHEY, FL 34654

FEI Number: 59-3777979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, ANDREA
12548 MOON LAKE CIRCLE
NEW PORT, FL 34654 US

Name and Address of New Registered Agent:

STEWART, ANDREA
12548 MOON LAKE CIRCLE
NEW PORT RICHEY, FL 34654 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: ANDREA STEWART

02/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOWNES, JOHN
Address: 12548 MOON LAKE CIRCLE
City-St-Zip: NEW PORT, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DOWNES, JOHN
Address: 12548 MOON LAKE CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34654

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN DOWNES

PD

02/22/2009

Electronic Signature of Signing Officer or Director

Date