

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050184

FILED
Mar 17, 2009
Secretary of State

Entity Name: DOWNTOWN REALTY SERVICES, INC.

Current Principal Place of Business:

PARK PLAZA PROFESSIONAL BUILDING, STE #105
120 EAST OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

724 NE 2ND STREET
POMPANO BEACH, FL 33060 US

Current Mailing Address:

PARK PLAZA PROFESSIONAL BUILDING, STE #105
120 EAST OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33334

New Mailing Address:

724 NE 2ND STREET
POMPANO BEACH, FL 33060 US

FEI Number: 26-2668638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCULLOUGH, STEPHEN D CLA
2702 A WEST OAKLAND PARK BOULEVARD
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NICHOLSON, MARLA
Address: 724 NE 2ND STREET
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARLA NICHOLSON

D

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date