


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 25, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000088512</b>	
1. Entity Name <b>THE DOWNEY FAMILY CORPORATION</b>	

Principal Place of Business <b>3201 CARDINAL DR VERO BCH FL 32963 US</b>	Mailing Address <b>PO BOX 3040 VERO BCH FL 32964 US</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E034 (10/04)

4. FEI Number <b>65-0456675</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>
<b>STEWART, WILLIAM J 3355 OCEAN DRIVE VERO BEACH FL 32963</b>

<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	DP <input type="checkbox"/> Delete
NAME	DOWNEY, GREGOR S
STREET ADDRESS	PO BOX 3040 N/A
CITY-ST-ZIP	VERO BCH FL 32964
TITLE	DVP <input type="checkbox"/> Delete
NAME	DOWNEY JR, DANIEL G
STREET ADDRESS	PO BOX 3040 N/A
CITY-ST-ZIP	VERO BCH FL 32964
TITLE	D <input type="checkbox"/> Delete
NAME	DOWNEY, FREDERICK F
STREET ADDRESS	PO BOX 3040 N/A
CITY-ST-ZIP	VERO BCH FL 32964
TITLE	D <input type="checkbox"/> Delete
NAME	DOWNEY, BRYAN R
STREET ADDRESS	P.O. BOX 3040
CITY-ST-ZIP	VERO BEACH FL 32964
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNATURE:</b>	<i>William J. Stewart</i>	<b>2-21-05</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date