

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P93000088512

1. Entity Name

THE DOWNEY FAMILY CORPORATION



Principal Place of Business

3201 CARDINAL DR
VERO BCH, FL 32963 US

Mailing Address

PO BOX 3040
VERO BCH, FL 32964 US

DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0456675

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEWART, WILLIAM J
3355 OCEAN DRIVE
VERO BEACH, FL 32963

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000781076
01/15/08 80020 010 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
DOWNEY, GREGOR S
PO BOX 3040 N/A
VERO BCH, FL 32964

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
DOWNEY JR, DANIEL G
PO BOX 3040 N/A
VERO BCH, FL 32964

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DOWNEY, FREDERICK F
PO BOX 3040 N/A
VERO BCH, FL 32964

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DOWNEY, BRYAN R
P.O. BOX 3040
VERO BEACH, FL 32964

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #