

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053435

FILED
Apr 21, 2006
Secretary of State

Entity Name: DOWNTOWN ENTERPRISES, INC.

Current Principal Place of Business:

915 COUNTRY CLUB BLVD
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

4845 SW 24TH PLACE
CAPE CORAL, FL 33914

New Mailing Address:

915 COUNTRY CLUB BLVD.
CAPE CORAL, FL 33990

FEI Number: 65-0596572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENZ, BRIAN
4845 SW 24TH PLACE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

LENZ, BRIAN
4229 SW 19TH PLACE
CAPE CORAL, FL 33914 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:

04/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LENZ, BRIAN
Address: 4845 SW 24TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: LENZ, CHERIE
Address: 4845 SW 24TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LENZ, BRIAN
Address: 4229 SW 19TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Change () Addition
Name: LENZ, CHERIE
Address: 4229 SW 19TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN LENZ

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date