

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-03-2008 90027 016 ***150.00

DOCUMENT # P96000048111 1. Entity Name DOWNING CREEK INC.	
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Principal Place of Business 195 SE C.A. HOWELL DR. BRANFORD, FL 32008 US	Mailing Address 195 SE C.A. HOWELL DR BRANFORD, FL 32008 US
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66007806



02142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3394157	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOWELL, EDNA B 195 SE C.A. HOWELL DR. BRANFORD, FL 32008

**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 Edna B. Howell DATE 3-21-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT HOWELL, EDNA B 195 SE C.A. HOWELL DR. BRANFORD, FL 32008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS HOWELL, DENNIS E 227 SE C.A. HOWELL DR. BRANFORD, FL 32008
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**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: Edna B. Howell - Edna B. Howell DATE: 4-23-08 DAYTIME PHONE: 354-935-1784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR