

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010120

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** DOWNTOWN MELBOURNE HOSPITALITY ASSOCIATION INC

**Current Principal Place of Business:**

705 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

705 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901 US

**New Mailing Address:**

705 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**FEI Number:** 27-1590391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GENOVESE, LENA  
705 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GENOVESE, LENA  
Address: 705 EAST NEW HAVEN AVENUE  
City-St-Zip: MELBOURNE, FL 32901 US

Title: VP  
Name: KEITH, JOHNSON  
Address: 918 E NEW HAVEN AVENUE  
City-St-Zip: MELBOURNE, FL 32901

Title: T  
Name: KONRADY, SCOTT  
Address: 705 E NEW HAVEN AVENUE  
City-St-Zip: MELBOURNE, FL 32901

Title: S  
Name: ELLIS, KRIS  
Address: 701 E NEW HAVEN AVENUE  
City-St-Zip: MELBOURNE, FL 32901

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LENA GENOVESE

P

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date