

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
95 MAY 31 AM 9:10

DOCUMENT # N93000001750 (9)

1. Corporation Name
THE MERCHANTS ASSOCIATION OF DOWNTOWN DUNEDIN IN CORPORATED

Principal Place of Business: 351 MAIN STREET, DUNEDIN FL 34698
Mailing Address: 351 MAIN STREET, DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/20/1993
3a. Date of Last Report: 06/27/1994

4. FEI Number: 59-3180141
Applied For: Not Applicable:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-23)
2a. Mailing Address (26-28)
24. Zip (24-25) Country (29-30)

9. Name and Address of Current Registered Agent
KALPAKIS, JAMES D
26338 U.S. 19 NORTH
SUITE 110
CLEARWATER FL 34621

10. Name and Address of New Registered Agent
81 Name: GREGORY BRADY
82 Street Address (P.O. Box Number is Not Acceptable): 351 MAIN ST.
83 City & State: DUNEDIN FL
84 Zip: 34698

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, partnership, limited liability company or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: GREGORY R. BRADY DATE: 5/25/95

12. OFFICERS AND DIRECTORS

TITLE: D	NAME: BRADY, GREGG	STREET ADDRESS: 351 MAIN STREET	CITY- ST- ZIP: DUNEDIN FL 34698
TITLE: D	NAME: MOORE, ROBERT	STREET ADDRESS: 325 MAIN STREET	CITY- ST- ZIP: DUNEDIN FL 34698
TITLE: D	NAME: HELMS, TAMARA	STREET ADDRESS: 234 DOUGLAS AVE	CITY- ST- ZIP: DUNEDIN FL 34698
TITLE: S	NAME: PETERSEN, NYCTORIA	STREET ADDRESS: 365 MAIN ST	CITY- ST- ZIP: DUNEDIN FL 34698

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY- ST- ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	KATHERINE KELLEY
43 STREET ADDRESS	131 BROADWAY
44 CITY- ST- ZIP	DUNEDIN FLA. 34698
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Tamara Helms TAMARA HELMS - TREASURER 5-054-734-0779