

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004427

FILED
Apr 18, 2005
Secretary of State

Entity Name: DOWNTOWN STREET PARTIES, INC.

Current Principal Place of Business:

200 N. BAY STREET
EUSTIS, FL 32726

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 164
EUSTIS, FL 327270164

New Mailing Address:

FEI Number: 59-3588903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUDD, CHARLES
200 N. BAY STREET
EUSTIS, FL 32726 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: DP () Delete
Name: BAKER, JILL
Address: 215 N. BARNES AVE.
City-St-Zip: EUSTIS, FL 32726

Title: DVP () Delete
Name: FORBES, TINA
Address: 245 E. 3RD AVE.
City-St-Zip: MOUNT DORA, FL 32757

Title: DT () Delete
Name: BOCK, RICHARD
Address: 42 E. MAHNLIA AVE.
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ROBIN, BETH
Address: 402 N. BAY STREET
City-St-Zip: EUSTIS, FL 32726 US

Title: DVP (X) Change () Addition
Name: KALUS, MATT
Address: 605 E. WASHINGTON AVE.
City-St-Zip: EUSTIS, FL 32726 US

Title: DT (X) Change () Addition
Name: YOWLER, MILDRED
Address: 216 MAGNOLIA LANE
City-St-Zip: EUSTIS, FL 32726 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETH ROBIN

DP

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date