2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004427

1. Entity Name

DOWNTOWN STREET PARTIES, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90126 008 ****61.25

		GOD WE THE					
Principal Place of Business 32 E. MAGNOLIA SUITE 2 EUSTIS FL 32726	Mailing Address POST OFFICE BOX 164 EUSTIS FL 32727-0164						
2. Principal Place of Business 40 S. Dewey Street	3. Mailing Address	<u> </u>					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		c	☐ CHECK HERE IF MAKING CHANGES			
Suite 1 City & State	City & State		4. FEI Number FO.	4. FEI Number 59-3588903 Applied For			
Eustis, FLorida		, -	Not Applicable				
Zip Country 32726 U.S.A.	Žip	Country	5. Certificate of Sta		\$8.75 Add Fee Require		
6. Name and Address of Curren	t Registered Agent		7. Name and Addre	ess of New Registered A	gent		
RUDD, CHARLES 32 E. MAGNOLIA SUITE 2 EUSTIS FL 32726	· · · · · · · · · · · · · · · · ·	Name Cha Street Addres 40 S. Suite	rles Rudd s (P.O. Box Number is No Dewey Stree	ot Acceptable)			
		City	<u> </u>	FL	Zip Code 3272	e_	
8. The above named entity submits this statement of the obligations of registered agent: SIGNATURE Signature_typed or printed name of registered agent.	4	Eustis registered office or regis Program Ma E: Registered Agent signature requ	tered agent, or both, in th		amiliar with,		
FILE NOW: FEE IS \$61.25	Trust Fund (\$5.00 May Be Added to Fees	Make Check Florida Depart	ment of S	State	
10. OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIF	RECTORS IN Change	□ Addition	
NAME STREET ADDRESS CITY-ST-ZIP EUSTIS FL 32726	Delete	NAME R i STREET ADDRESS 4 2	chard Bock E. Magnoli stis. FL 3	a Avenue 2726.	Las Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP DT BOCK, RICHARD 42 E. MAGNOLIA AVENUE EUSTIS FL 32726	∑ Delete	TITLE DV NAME T i STREET ADDRESS CITY-ST-7IP	p na Forbes Townhill D	rive	Change	Addition	
TITLE DS NAME FORBES, TINA STREET ADDRESS CITY-SI-ZIP EUSTIS FL 32726	∑ Delete	TITLE DT NAME STREET ADDRESS CITY-ST-ZIP 2	stis, FL3 arron Semen Cypress Dr	ive	Change	∑ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ De/ete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	stis, FL 3	2726	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition .	
12. I hereby certify that the information supplied with	th this filing does not qualify fo	r the exemption stated in	Section 119.07(3)(i), Flor	ida Statutes. I further cert	ify that the ir	nformation	

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 617, 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:

4-24-03