2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700905

FILED Apr 17, 2007 Secretary of State

Entity Name: DOWNTOWN LAKELAND PARTNERSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 3499 1 LAKE MORTON DRIVE LAKELAND, FL 33802 LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

P.O. BOX 3499 LAKELAND, FL 33802

FEI Number: 59-3186443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HALLOCK, DAVID D JR.
LANE, TROHN, BERTRAND & VREELAND, P.A.
ONE LAKE MORTON DRIVE
LAKELAND, FL 33801 US
HALLOCK, DAVID D JR.
GRAYROBINSON
ONE LAKE MORTON DRIVE
LAKELAND, FL 33801 US

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: 04/17/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

117 S. KENTUCKY AVE.

LAKELAND, FL 33801

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 VREELAND, HOLLY
 Name:
 VREELAND, HOLLY

 Address:
 129 S. KY. AVE
 Address:
 129 S. KY. AVE

 Address:
 129 S. KY. AVE
 Address:
 129 S. KY. AVE

 City-St-Zip:
 LAKELAND, FL 33801
 City-St-Zip:
 LAKELAND, FL 33801

Title: PD () Delete Title: VD (X) Change () Addition Name: BROOKS, CHANDLER Name: JOHN, HUTTO

 Address:
 820 S. FLORIDA AVE.
 Address:
 130 S KENTUCKY AVE

 City-St-Zip:
 LAKELAND, FL 33801
 City-St-Zip:
 LAKELAND, FL 33801

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 BRIENT, LINDA
 Name:
 B. J., MILLER

 Address:
 121 S. KENTUCKY AVE.
 Address:
 4025 S PIPKIN RD

 City-St-Zip:
 LAKELAND, FL 33801
 City-St-Zip:
 LAKELAND, FL 33811

Title: TD () Delete Title: () Change () Addition Name: SIMMS, ELLEN Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ELLEN H SIMMS TD 04/17/2007