2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700905

FILED Jan 11, 2008 Secretary of State

Entity Name: DOWNTOWN LAKELAND PARTNERSHIP, INC.

Current Principal Place of Business: New Principal Place of Business: 1 LAKE MORTON DRIVE 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. 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition VREELAND, HOLLY JONES, KEVIN Name: Name: 129 S. KY. AVE Address: 129 S KENTUCKY AVENUE, 7TH FLOOR Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33801 Title: VD Title: (X) Change () Addition () Delete JOHN, HUTTO Name: HUTTO, JOHN Name: Address: 130 S KENTUCKY 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 B. J., MILLER SIMMS, ELLEN Name: Name: Address: 4025 S PIPKIN RD Address: 117 S KENTUCKY AVENUE City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33801 Title: TD () Delete Title: (X) Change () Addition Name: SIMMS, ELLEN Name: STETSON, DANIEL 800 E PALMETTO ST Address: 117 S. KENTUCKY AVE. Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33801 Title: () Delete Title: () Change (X) Addition NIXON, JIM Name: Name: 228 S MASASACHUSETTS AVE Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33801 Title: () Delete Title: () Change (X) Addition POWELL, LORI Name: Name: Address: Address: 701 W LIME ST LAKELAND, FL 33815 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 SD 01/11/2008