

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700905

FILED
Jan 16, 2009
Secretary of State

Entity Name: DOWNTOWN LAKE LAND PARTNERSHIP, INC.

Current Principal Place of Business:

1 LAKE MORTON DRIVE
LAKE LAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3499
LAKE LAND, FL 33802

New Mailing Address:

FEI Number: 59-3186443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLOCK, DAVID D JR.
GRAYROBINSON
ONE LAKE MORTON DRIVE
LAKE LAND, FL 33801 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: VD () Delete
Name: JONES, KEVIN
Address: 129 S KENTUCKY AVENUE, 7TH FLOOR
City-St-Zip: LAKE LAND, FL 33801

Title: PD () Delete
Name: HUTTO, JOHN
Address: 130 S KENTUCKY AVE
City-St-Zip: LAKE LAND, FL 33801

Title: SD () Delete
Name: SIMMS, ELLEN
Address: 117 S KENTUCKY AVENUE
City-St-Zip: LAKE LAND, FL 33801

Title: D () Delete
Name: STETSON, DANIEL
Address: 800 E PALMETTO ST
City-St-Zip: LAKE LAND, FL 33801

Title: D () Delete
Name: NIXON, JIM
Address: 228 S MASSACHUSETTS AVE
City-St-Zip: LAKE LAND, FL 33801

Title: D () Delete
Name: POWELL, LORI
Address: 701 W LIME ST
City-St-Zip: LAKE LAND, FL 33815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JONES, KEVIN
Address: 129 S KENTUCKY AVENUE, 7TH FLOOR
City-St-Zip: LAKE LAND, FL 33801

Title: VD (X) Change () Addition
Name: SIMMS, ELLEN
Address: 117 S KENTUCKY AVE
City-St-Zip: LAKE LAND, FL 33801

Title: TD (X) Change () Addition
Name: BROOKE, GLORIA
Address: 65 SHADOW LANE
City-St-Zip: LAKE LAND, FL 33813

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NIXON, JIM
Address: 228 S MASSACHUSETTS AVE
City-St-Zip: LAKE LAND, FL 33801

Title: () Change () Addition
Name:
Address:
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

VD

01/16/2009

Electronic Signature of Signing Officer or Director

Date