

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730965

FILED
Apr 29, 2005
Secretary of State

Entity Name: DOWNTOWN ASSOCIATION OF SARASOTA, INC.

Current Principal Place of Business:

1818 MAIN ST
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1818 MAIN ST.
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-1957528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, CHERYL
1818 MAIN ST.
SARASOTA, FL 34236 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: D () Delete
Name: RICHARDSON, BOB
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: KOFFER, CAROLINE
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: NICHOLAS, JOHN
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: GORDON, CHERYL
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GORDON, CHERYL
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Change () Addition
Name: BLACK, IAN
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

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

Title: D (X) Change () Addition
Name: FORSON, MICHAEL
Address: 1818 MAIN ST.
City-St-Zip: SARASOTA, FL 34236

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: JOHN NICHOLAS

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date