

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001892

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** DOWNTOWN NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

301 2ND STREET N #3  
ST. PETERSBURG, FL 33731 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1003  
ST. PETERSBURG, FL 33731 US

**New Mailing Address:**

**FEI Number:** 59-3652446      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BROCKWAY, ALLAN R  
301 2ND STREET NORTH, #3  
ST. PETERSBURG, FL 33701 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: SD  
Name: BAKER, TIMOTHY J  
Address: 350 2ND STREET NORTH,#16  
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: TD  
Name: BROCKWAY, ALLAN R  
Address: 301 2ND STREET NORTH, #3  
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: PD  
Name: OLSEN, MARYLIN  
Address: 100 BEACH DR, NE, APT.1603  
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: D  
Name: GROOMS, GARY  
Address: 175 2ND STREET S, APT 810  
City-St-Zip: ST. PETERSBURG, FL 33701 US

I hereby 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 all other like empowered.

SIGNATURE: ALLAN BROCKWAY

TD

01/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date