

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009744

FILED
Apr 22, 2008
Secretary of State

Entity Name: DOWNTOWN SARASOTA MERCHANTS ALLIANCE, INC.

Current Principal Place of Business:

1460 MAIN STREET STE 13
SARASOTA, FL 34236

New Principal Place of Business:

1460 MAIN STREET
SUITE 4
SARASOTA, FL 34236

Current Mailing Address:

PO BOX 11011
SARASOTA, FL 34278

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RITZ, ERNEST
27 N LEMON AVE
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: DP () Delete
Name: BUSH, MICHAEL
Address: 1924 S OSPREY AVENUE
City-St-Zip: SARASOTA, FL 34239

Title: DV () Delete
Name: LICCIARDI, LANCE
Address: 80 S PALM AVE
City-St-Zip: SARASOTA, FL 34246

Title: DS () Delete
Name: KOWAL, DENISE
Address: PO BOX 1767
City-St-Zip: SARASOTA, FL 34230

Title: DT () Delete
Name: RITZL, ERNEST
Address: 27 N LEMON AVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DT (X) Change () Addition
Name: RITZ, ERNEST
Address: 27 N LEMON AVE
City-St-Zip: SARASOTA, FL 34236

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: ERNEST RITZ

TD

04/22/2008

Electronic Signature of Signing Officer or Director

Date