2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009744

FILED Jan 25, 2009 Secretary of State

Entity Name: DOWNTOWN SARASOTA MERCHANTS ALLIANCE, INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
60 MAIN	STREET				
JITE 4	A EL 04000				
KASOT	A, FL 34236				
urrent Mailing Address:			New Mailing Addr	New Mailing Address:	
BOX 1					
KA301	A, FL 34278				
l Number:	:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
ıme and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
	NEST ON AVE FA, FL 34236	US			
			ourness of changing its regists	ared office or registered agent, or both	
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registe	ered office of registered agent, of both,	
the State	e of Florida.	ubmits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
the State	e of Florida. RE:	c Signature of Registered Age		Date	
the State	e of Florida. RE:	c Signature of Registered Age	ent		
the State GNATUF FFICERS e: me: dress:	e of Florida. RE: Electroni S AND DIRECT DP () BUSH, MICHAEL 1924 S OSPREY	c Signature of Registered Age FORS: Delete FORDER	ent ADDITIONS/CHAN Title: Name: Address:	Date	
the State SNATUF FICERS the the	e of Florida. RE: Electroni S AND DIRECT DP () BUSH, MICHAEL 1924 S OSPREY SARASOTA, FL	c Signature of Registered Age FORS: Delete AVENUE 34239 Delete CE	ent ADDITIONS/CHAN Title: Name:	Date NGES TO OFFICERS AND DIRECTOR	
the State GNATUF FICERS ine: iress: ir-St-Zip: ine: iress:	e of Florida. RE: Electroni S AND DIRECT DP () BUSH, MICHAEL 1924 S OSPREY SARASOTA, FL DV () LICCIARDI, LAN 80 S PALM AVE SARASOTA, FL	c Signature of Registered Age FORS: Delete 7 AVENUE 34239 Delete CE 34246 Delete E	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTOR () Change () Addition	

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 TRES 01/25/2009