2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004
Secretary of State

DOCUMENT# N36639

Entity Name: DISTRICT SIX, INC.

Current Principal Place of Business:

2918 W KENNEDY BLVD
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

2918 W KENNEDY BLVD
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: 59-2992605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AUSTIN, CAROL
2918 W KENNEDY BLVD
TAMPA, FL 33609 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: P ( ) Delete
Name: NEIMAN, LAURIE
Address: 8106 U.S. HWY 19
City-St-Zip: PORT RICHEY, FL 34668

Title: V ( ) Delete
Name: SMYTH, WALT
Address: 2331 4TH ST N
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D ( ) Delete
Name: MEMOLI, ROBERT
Address: 1248 SEVEN SPRINGS BLVD
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD ( ) Delete
Name: AUSTIN, CAROL A
Address: 2918 W KENNEDY BLVD
City-St-Zip: TAMPA, FL 33609

Title: S ( ) Delete
Name: RYAN, GINNY
Address: 15435 N FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33613

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BINDMAN, MICHAEL
Address: 6400 4TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: V (X) Change ( ) Addition
Name: ALEXANDER, ALMA J
Address: 14502 N DALE MABRY
City-St-Zip: TAMPA, FL 33618

Title: TD (X) Change ( ) Addition
Name: AUSTIN, CAROL A
Address: 2918 W KENNEDY BLVD
City-St-Zip: TAMPA, FL 33609

Title: S (X) Change ( ) Addition
Name: GRAHAM, SUSAN S
Address: 6935 LAND O'LAKES BLVD
City-St-Zip: LAND O'LAKES, FL 34639

Title: D (X) Change ( ) Addition
Name: JACOBS, SAM
Address: 8410 US HWY 19 SUITE 105
City-St-Zip: PORT RICHEY, FL 34668

Title: D ( ) Change (X) Addition
Name: MCLEOD, KATHY
Address: 4947 COATS RD.
City-St-Zip: ZEPHRYHILLS, FL 33541

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: MICHAEL BINDMAN P 03/05/2004
Electronic Signature of Signing Officer or Director Date