

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2004  
Secretary of State**

DOCUMENT# N42043

Entity Name: THE SOUTHSIDE VILLAGE BUSINESS ASSOCIATION, INC.

**Current Principal Place of Business:**

1757 HYDE PARK ST.  
SARASOTA, FL 34239 US

**New Principal Place of Business:**

**Current Mailing Address:**

1757 HYDE PARK ST.  
SARASOTA, FL 34239 US

**New Mailing Address:**

FEI Number: 59-3050780      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JILES, EFTON  
1830 SOUTH OSPREY AVENUE  
SUITE 101  
SARASOTA, FL 34239 US

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

JILES, EFTON T  
1830 SOUTH OSPREY AVENUE  
SUITE 101  
SARASOTA, FL 34239 US

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: EFTON T. JILES      01/07/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PDD ( ) Delete  
Name: JILES, EFTON  
Address: 1830 S. OSPREY AVE, STE. 101  
City-St-Zip: SARASOTA, FL 34239

Title: VD ( ) Delete  
Name: WALLACE, EILEEN HAYS  
Address: 1924 S. OSPREY AVE, STE. 101  
City-St-Zip: SARASOTA, FL 34239

Title: SD ( ) Delete  
Name: BARGER, KNICKOLE  
Address: 1757 HYDE PARK ST.  
City-St-Zip: SARASOTA, FL 34239

Title: TD ( ) Delete  
Name: DRIZOS, NICHOLAS  
Address: 1830 S. OSPREY AVE, STE. 102  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: RILEY, JAY  
Address: 1924 S. OSPREY AVE, STE. 102  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: RILEY, JAY  
Address: 1924 S. OSPREY AVE, STE. 201  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDD (X) Change ( ) Addition  
Name: JILES, EFTON T  
Address: 1830 S. OSPREY AVE, STE. 101  
City-St-Zip: SARASOTA, FL 34239

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

Title: D (X) Change ( ) Addition  
Name: MILWEE, MILES  
Address: 1920 HILLVIEW STREET  
City-St-Zip: SARASOTA, FL 34239

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: EFTON T. JILES      PDD      01/07/2004  
Electronic Signature of Signing Officer or Director      Date