

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 13, 2006
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 ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BARGER, KNICKOLE
1757 HYDE PARK ST
SARASOTA, FL 34239 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: KNICKOLE BARGER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDD () Delete
Name: MORTON, EDDIE
Address: 1924 S OSPREY AVE, STE 202
City-St-Zip: SARASOTA, FL 34239

Title: VD () Delete
Name: MAKEEVER, MICHELLE
Address: 1950 S TAMiami TRAIL
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: WALLACE, EILEEN
Address: 1924 S OSPREY AVE, STE 104
City-St-Zip: SARASOTA, FL 34239

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAY RILEY

Electronic Signature of Signing Officer or Director

D

12/13/2006

Date