2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N94000003559

Entity Name: THE DOWNTOWN CATHEDRAL ENTERPRISES, INC.

Current Principal Place of Business:

506 E. HARRISON STREET
TAMPA, FL 33601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 172066
TAMPA, FL 33602

New Mailing Address:

FEI Number: 53-0204696 **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:

YOUNG, MCKINLEY BISHOP
101 EAST UNION STREET, STE. 301
JACKSONVILLE, FL 32202 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: PD ( ) Delete
Name: FAYSON, BRYANT A
Address: 10843 HOFFNER EDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: D ( ) Delete
Name: ARMSTRONG, LYNNWOOD
Address: 10844 HOFFNER EDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: D ( ) Delete
Name: SOTOLONGO, VEVE
Address: 1207 E 17TH AVE
City-St-Zip: TAMPA, FL 33605

Title: D ( ) Delete
Name: FOSSITT, EVELYN
Address: 6340 S. RENELLE COURT
City-St-Zip: TAMPA, FL 33616

Title: D ( ) Delete
Name: LUNDY, BOOKER T
Address: 2104 W BEACH STREET APT. A
City-St-Zip: TAMPA, FL 33607

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:

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: BRYANT A. FAYSON PD 05/01/2009

Electronic Signature of Signing Officer or Director — Date