

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 23, 2006
Secretary of State**

DOCUMENT# N95000000072

Entity Name: THE DOWNTOWN PARTNERSHIP OF SARASOTA, INC.**Current Principal Place of Business:**1818 MAIN STREET
SARASOTA, FL 34236 US**New Principal Place of Business:**1365 FRUITVILLE RD
SARASOTA, FL 34236 US**Current Mailing Address:**1818 MAIN STREET
SARASOTA, FL 34236 US**New Mailing Address:**1365 FRUITVILLE RD
SARASOTA, FL 34236 US

FEI Number: 65-0621028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:GORDON, CHERYL
1818 MAIN STREET
SARASOTA, FL 34236 US**Name and Address of New Registered Agent:**GORDON, CHERYL
1365 FRUITVILLE RD.
SARASOTA, FL 34236 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: CHERYL GORDON

08/23/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: GORDON, CHERYL
Address: 1818 MAIN STREET
City-St-Zip: SARASOTA, FL 34236Title: D () Delete
Name: BLACK, IAN
Address: 1818 MAIN STREET
City-St-Zip: SARASOTA, FL 34236Title: D () Delete
Name: NICHOLAS, JOHN
Address: 1818 MAIN STREET
City-St-Zip: SARASOTA, FL 34236Title: D (X) Delete
Name: FORSON, MICHAEL
Address: 1818 MAIN STREET
City-St-Zip: SARASOTA, FL 34236**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: O (X) Change () Addition
Name: BLACK, IAN
Address: 1365 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34236Title: O (X) Change () Addition
Name: NICHOLAS, JOHN
Address: 1365 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34236Title: O (X) Change () Addition
Name: SAM, NORTON
Address: 1365 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34236Title: () 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: IAN BLACK

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08/23/2006

Electronic Signature of Signing Officer or Director

Date