2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000072

FILED Apr 05, 2007 Secretary of State

Entity Name: THE DOWNTOWN PARTNERSHIP OF SARASOTA, INC.

Current Principal Place of Business: New Principal Place of Business:

1365 FRUITVILLE RD SARASOTA, FL 34236 US

Current Mailing Address: 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 ()

Name and Address of Current Registered Agent: 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:

Cleater in Circusture of Devictor of America

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O () Delete Title: O (X) Change () Addition Name: BLACK, IAN Name: NORTON, SAM

Address: 1365 FRUITVILLE RD Address: 1365 FRUITVILLE RD City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

 Title:
 O
 () Delete
 Title:
 O
 (X) Change () Addition

 Name:
 NICHOLAS, JOHN
 Name:
 STEVENS, JEFFERY

Address: 1365 FRUITVILLE RD. Address: 1365 FRUITVILLE RD. City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

 Title:
 O
 () Delete
 Title:
 O
 (X) Change () Addition

 Name:
 SAM, NORTON
 Name:
 SAUNDERS, DRAYTON

 Address:
 1365 FRUITVILLE RD
 Address:
 1365 FRUITVILLE RD

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34236

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: JEFFERY STEVENS D 04/05/2007