2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000006878

Entity Name: GREATER DOWNTOWN SARASOTA ACTION TEAM, INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PREY AVENU A, FL 34236	JE			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX SARASOT	48612 A, FL 34230				
FEI Number: 65-0798968 FEI Number Applied For ()			FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
The above	ST A, FL 34237	US submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATU		nic Signature of Registered Age	nt	Date	
OFFICER	S AND DIREC	0 0		ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (GREEN, EMM 2115 6TH STF SARASOTA, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (WILSON, CHA 435 SEEDS A SARASOTA, F	VENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (ROE, ERIC 32117 MIARC MYAKKA CITY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (VAUGHN, SAN 2135 4TH STF SARASOTA, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (DAVIS, JENCI 1420 5TH STF SARASOTA, F	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HOLLAND, LIN 617 GILLESPI SARASOTA, F	E AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ERIC A. ROE TD 05/01/2003