2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000005598

FILED Apr 04, 2005 8:00 am Secretary of State

04-04-2005 90094 019 ****61.25

1. Entity Name BRADENTON DOWNTOWN PROGRESS, INC.												
802 11TH ST W BRADENTON, FL 34205			1301 Suite	Mailing Address 1301 SIXTH AVE W SUITE 600 BRADENTON, FL 34205 US				 			<u>0</u> 336	
2. Principal Place of Business 3. Ma			3. Maili	Mailing Address								
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				01122005	Chg-NP	CR2E037	(10/03)	
City & State			City	City & State				4. FEI Number Applied For 65-0867039 Not Applicable				
Zip	Country			Zip Co						8.75 Add e Required	.75 Additional Required	
6. Name and Address of Current Register				d Agent		7. Name and Address of New Registered Agent						
BLALOCK, LANDERS, WALTERS & VOGLER, P.A. 802 11TH ST W BRADENTON, FL 34205					•	Name Street Address (P.O. Box Number is Not Acceptable)						
					City			FL Zip Code				
	tions of regist	y submits this statement ered agent. or printed name of registered age				· · · <u></u>		red agent, or both,	in the State of F	lorida. I am far	niliar with,	and accept
Filing Fee is \$61.25 9. Election Ca Due by May 1, 2005 Trust Fund							0	\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.		OFFICERS AND I	DIRECTORS		11.			ADDITIONS/CHAP	IGES TO OFFIC	ERS AND DIRE	CTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	KEN I'H AVE W #600 I'ON, FL 34205		☐ Delete						<u>-</u>	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	i .	ERRY J RUST BANK, 303 9TI FON, FL_34205	H ST. W	₩ Delete						-	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	920 14TH	., GERALD O ST., W TON, FL : 34205	,	□ Delete ·			805	ESIDENT SSEUL GERA D 14th ST U AOENTON, F			∡ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CONRAD, 911 14TH BRADENT			Delete)	1						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete							Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete				. ———			Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/31/05

941-747-4483

Daytime Prione #