

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000004386

FILED
Apr 24, 2003
Secretary of State

Entity Name: THE GREATER DOWNTOWN ASSOCIATION, INC.

Current Principal Place of Business:

436 MCKENZIE AVENUE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

436 MCKENZIE AVENUE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-3594919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWDY, EMILY L
436 MCKENZIE AVENUE
PANAMA CITY, FL 32401

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: DVP () Delete
Name: BRENT, PAUL
Address: 413 W. 5TH STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: DT () Delete
Name: DAVIS, NEILL
Address: 560 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: DVP () Delete
Name: DOWDY, EMILY L
Address: 436 MCKENZIE AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: SOBANSKI, DENNIS E
Address: 110 OAK RIDGE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: DVP () Delete
Name: HURST, BOB
Address: 133 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: DVP () Delete
Name: JORDAN, ANN
Address: 207 E. 4TH STREET
City-St-Zip: PANAMA CITY, FL 32401

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:

Title: () 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 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: EMILY L. DOWDY

DVP

04/24/2003

Electronic Signature of Signing Officer or Director

Date