

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007459

FILED
May 07, 2009
Secretary of State

Entity Name: DOWNTOWN BUSINESS ASSOCIATION OF STUART, INC.

Current Principal Place of Business:

47 S.W. FLAGLER AVE
STUART, FL 34994

New Principal Place of Business:

47 S.W. FLAGLER AVENUE
STUART, FL 34994

Current Mailing Address:

P.O. BOX 1708
STUART, FL 34995

New Mailing Address:

FEI Number: 65-0970133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PATEISON, PEGGY
56 SW ALBANY AVE
STUART, FL 34994 US

Name and Address of New Registered Agent:

PATERSON, MARGARET A EA
56 SW ALBANY AVENUE
STUART, FL 34994 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: MARGARET A PATERSON EA

05/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOROWITZ, DAVID
Address: 41 SW FLAGLER AVE
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: BAKER, SARAH
Address: 715 COLORADO AV
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: BENVENUTO, DOMANICK
Address: 3 SW OSCEOLA ST
City-St-Zip: STUART, FL 34994

Title: D (X) Delete
Name: BELLA, JOHN
Address: 39 W OSCEOLA ST
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DALY, PAUL
Address: 47 SW FLAGLER AVENUE
City-St-Zip: STUART, FL 34994

Title: S/T (X) Change () Addition
Name: BAKER, SARAH
Address: 715 COLORADO AVENUE
City-St-Zip: STUART, FL 34994

Title: VP (X) Change () Addition
Name: BELLA, JOHN
Address: 39 W OSCEOLA STREET
City-St-Zip: STUART, FL 34994

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SARAH BAKER

S/T

05/07/2009

Electronic Signature of Signing Officer or Director

Date