

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


APPROVAL  
AND  
FILED

03 MAY -1 AM 6:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P0000059881**

1. Entity Name  
**WEST DOWNTOWN PROPERTIES, INC.**



Principal Place of Business  
**742 W AMELIA ST  
ORLANDO, FL 32805**

Mailing Address  
**742 W AMELIA ST  
ORLANDO, FL 32805**

2. Principal Place of Business

3. Mailing Address  
**P.O. Box 540059**

Suite, Apt. #, etc.

City & State  
**ORLANDO FL**

Zip  
**32857-0059**

Country  
**USA**



CHECK HERE IF MAKING CHANGES

4. FEI Number  
**04-3634827**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VAN GELDER, DAVID  
742 W AMELIA ST  
ORLANDO, FL 32805**

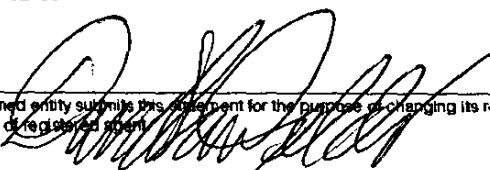
7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **4/30/03**

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW!! FEE IS \$150.00**  
After May 1, 2003 fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

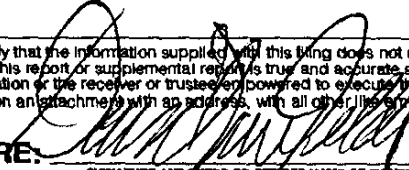
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	GELDER, DAVID V	742 W AMELIA STREET	ORLANDO, FL 32805	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	SHOULD BE			<input type="checkbox"/>	<input type="checkbox"/>
	VAN Gelder, David			<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 607, 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 filers empowered.

SIGNATURE:  **DAVID VAN GELDER** DATE **4/30/03** **407-296-1400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)