

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723823

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: SPANISH MAIN ASSOCIATION, INC.

**Current Principal Place of Business:**

25 SUNFLOWER ST  
COCOA BEACH, FL 329318262

**New Principal Place of Business:**

**Current Mailing Address:**

1980 N ATLANTIC AVE  
701  
COCOA BEACH, FL 32931

**New Mailing Address:**

FEI Number: 59-1647414      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, PETEY  
1980 N ATLANTIC AVE  
SUITE 701  
COCOA BCH, FL 32931 US

**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: PD ( ) Delete  
Name: SIMPSON, JERRY  
Address: 35 SUNFLOWER STREET  
City-St-Zip: COCOA BEACH, FL 32931

Title: VPD ( ) Delete  
Name: NAVARRO, SAM  
Address: 1 SUNFLOWER ST 62  
City-St-Zip: COCOA BEACH, FL 32931

Title: SD ( ) Delete  
Name: MERCER, BILL  
Address: 5 SUNFLOWER ST #21  
City-St-Zip: COCOA BEACH, FL 32931

Title: TD ( ) Delete  
Name: FANNING, JOSEPH  
Address: 35 SUNFLOWER ST #65  
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete  
Name: CAMPBELL, BRUCE  
Address: 407 KILLARNEY PASS  
City-St-Zip: MUNDELEIN, IL 60060

**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:

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: JERRY SIMPSON

P

04/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date