

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2004 8:00 am**  
**Secretary of State**

02-12-2004 90028 009 \*\*\*\*61.25

**DOCUMENT # N95000002709**

1. Entity Name

**MAIN STREET WINTER HAVEN, INC.**



Principal Place of Business

505 AVE. A, NW  
102  
WINTER HAVEN FL 33881  
US

Mailing Address

P.O. BOX 32  
WINTER HAVEN FL 33882  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3319831**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~STRANG, CARL III PRES~~  
~~203 AVENUE A, NW~~  
~~300~~  
WINTER HAVEN FL 33881

Name

**Mike Seymour**

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

**1124 1ST STREET SOUTH**

City

**WINTER HAVEN**

FL

Zip Code

**33880**

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

*Mike Seymour*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WILSON, KERRY	
STREET ADDRESS	141 5TH ST NW	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOGDAHN, JOE	
STREET ADDRESS	62 4TH ST NW	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	D	<input type="checkbox"/> Delete
NAME	COMPTON, MIKE	
STREET ADDRESS	250 MAGNOLIA AVE. SW	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	<del>S/D</del>	<input type="checkbox"/> Delete
NAME	SANTIAGO, ALEX	
STREET ADDRESS	270 AVE A NW	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHEEHAN, DONNA	
STREET ADDRESS	<del>210 CYPRESS GARDENS BLVD</del> 451 3RD ST, NW	
CITY-ST-ZIP	WINTER HAVEN FL 33880 33881	
TITLE	<del>P/D</del>	<input type="checkbox"/> Delete
NAME	SEYMOUR, MIKE	
STREET ADDRESS	1124 FIRST ST, SW	
CITY-ST-ZIP	WINTER HAVEN FL 33880	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

*SEE ATTACHED*

12. I hereby certify that the information supplied with this filing does not qualify 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*1/30/04 863-275-9422*

Attachment

Die. # N9 5000002709  
Main Street Winter Haven, Inc.  
2003-2004 Board of Directors

**Kim Bass, Director**  
650 Sixth SW  
Winter Haven, FL 33880

**Cynthania Clark, Director**  
3000 Kville Avenue  
Auburndale, FL 33823

**Bill Dorman, Director**  
150 3<sup>rd</sup> St., SW  
Winter Haven., FL 33880

**Mike Easterling, Director**  
451 Third St. NW  
Winter Haven, FL 33881

**Bob Gernert, Director**  
401 Avenue B, NW  
Winter Haven, FL 33881

**Beth Higgins, Vice President/Director**  
2105 Dundee Rd  
Winter Haven, FL

**Kelly Kennedy, Director**  
198 First St., S  
Winter Haven, FL 33880

**Howard King, Director**  
500 E. Central Ave.  
Winter Haven, FL 33880

**Nelson Kirkland, Treasurer/Director**  
455 6<sup>th</sup> St., NW  
Winter Haven, FL 33881

**Mike McMahon, Director**  
451 Third St, SW  
Winter Haven, FL 33881

**Carl Strang, III, Director**  
203 Avenue A, NW  
Winter Haven, FL 33881

**Debbie Tennick, Director**  
325 W. Central Ave.  
Winter Haven, FL 33880

**Jan Touchtone, Director**  
210 Security Sq.  
WH 33880

**Susan Waddell, Director**  
253 Avenue A, SW  
Winter Haven, FL 33880

*staff*  
**Ronni Wood**  
505 Avenue A, NW  
Winter Haven, FL 33881

54005392