## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000000045

Entity Name: OKEECHOBEE MAIN STREET, INC.

FILED Apr 28, 2005 Secretary of State

105 SE 2ND STREET111 NE 2ND STREETOKEECHOBEE, FL 34974OKEECHOBEE, FL 34972

Current Mailing Address: New Mailing Address:

105 SE 2ND STREET
OKEECHOBEE, FL 34974

111 NE 2ND STREET
OKEECHOBEE, FL 34972

FEI Number: 65-0887929 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BURNETT, CINDY G T

105 SE 2ND STREET

OKEECHOBEE, FL 34974 US

BURROUGHS, TERRY W T

111 NE 2ND STREET

OKEECHOBEE, FL 34972 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: TERRY BURROUGHS 04/28/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition Name: BURROUGHS, MAUREEN P/D Name:

Name:BURROUGHS, MAUREEN P/DName:Address:119 SOUTH PARROTT AVEAddress:City-St-Zip:OKEECHOBEE, FL 34974City-St-Zip:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: BAKER, PATRICIA VP/D Name: MITCHELL, PAUL VP/D

 Address:
 P. O. BOX 2017
 Address:
 2735 SW GLENMOOR WAY

 City-St-Zip:
 OKEECHOBEE, FL 34973
 City-St-Zip:
 PALM CITY, FL 34990

Title: S () Delete Title: () Change () Addition

 Name:
 MURPHY, ALLISON S/D
 Name:

 Address:
 5106 SE 43RD TRACE
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34974
 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition BURNETT, CINDY G T/D Name: Name: BURROUGHS, TERRY W T/D Address: 1203 SE 8TH AVE. Address: 2661 SE 24TH BLVD City-St-Zip: OKEECHOBEE, FL 34974 City-St-Zip: OKEECHOBEE, FL 34974

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: TERRY BURROUGHS T 04/28/2005