

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004724

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: OLD PALM HARBOR MAIN STREET, INC.

**Current Principal Place of Business:**

1190 GEORGIA AVE  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

**Current Mailing Address:**

1190 GEORGIA AVE  
PALM HARBOR, FL 34683 US

**New Mailing Address:**

FEI Number: 59-3683895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLENNER, WALTER W  
2708 ALTERNATE 19 NORTH  
SUITE 701  
PALM HARBOR, FL 34683 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: VP ( ) Delete  
Name: MONTELARO, JAN  
Address: 120 PENNSYLVANIA AVE.  
City-St-Zip: PALM HARBOR, FL 34683

Title: S ( ) Delete  
Name: WAZELLE, JAY  
Address: 2295 TUSCANY TRACE #21  
City-St-Zip: PALM HARBOR, FL 34683

Title: T ( ) Delete  
Name: PRIEST, SHELIA  
Address: 1000 OMAHA ST  
City-St-Zip: PALM HARBOR, FL 34683

Title: PD ( ) Delete  
Name: KLEIN, LESLEY  
Address: 1219 FLORIDA AVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MONTELARO, JAN  
Address: 120 PENNSYLVANIA AVE.  
City-St-Zip: PALM HARBOR, FL 34683

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

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

Title: D (X) Change ( ) Addition  
Name: KLEIN, LESLEY  
Address: 1219 FLORIDA AVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: VP ( ) Change (X) Addition  
Name: WARMOUTH, RACHELLE  
Address: 6 EAGLE LANE  
City-St-Zip: PALM HARBOR, FL 34683

I hereby certify that the information supplied with this filing does not qualify for the 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: JAN MONTELARO

P

04/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date