

PD5000051275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

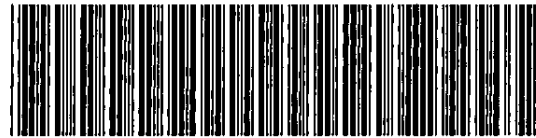
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAIN STREET AMERICA, Inc.
(Name of Corporation)

DOCUMENT NUMBER: POS000051275

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOUIS P. MISCIOSCIA
(Name of Contact Person)

MAIN STREET AMERICA, INC
(Firm/Company)

P. O. Box 951826
(Address)

LAKE MARY, FLORIDA 32795-1826
(City/State and Zip Code)

For further information concerning this matter, please call:

LOUIS P. MISCIOSCIA at (407) 375-9235
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2006

LOUIS P. MISCIOSCIA
MAIN STREET AMERICA, INC.
PO BOX 951826
LAKE MARY, FL 32795-1826

SUBJECT: MAIN STREET AMERICA, INC.
Ref. Number: P05000051275

We have received your document for **MAIN STREET AMERICA, INC.** and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 606A00054962

RECEIVED
SEP 22 8:00 AM
CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MAIN STREET AMERICA, INC

2. The principal office address: P.O. BOX 951826
LAKELAND, FLORIDA 32995-1826

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/6/2005 Document number: 00500051275

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
AIA CORPORATE SERVICES
6901 OKEECHOBEE BLVD. UNIT JS
WEST PALM BEACH, FL. 33411

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LOUIS P. MISCIOSCIA
3346 HORSESHOE BEND COURT
(P.O. Box NOT acceptable)
LAKELAND, FLORIDA 32999

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

LOUIS P. MISCIOSCIA, PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

9/17/06
(Date)

If signing on behalf of an entity:
LOUIS P. MISCIOSCIA
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***