

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000031605

FILED
Apr 29, 2009
Secretary of State

Entity Name: MAINSTREET & COMPANY, INC.

Current Principal Place of Business:

10529 LAKE WILLIAMS DR
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 544
TARPON SPRINGS, FL 34688 US

New Mailing Address:

FEI Number: 59-3380370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKEY, THOMAS
10529 LAKE WILLIAMS DR.
ODESSA, FL 33556 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILKEY, THOMAS
Address: 10529 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: VPD () Delete
Name: WILKEY, CYNTHIA
Address: 10529 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: S () Delete
Name: LONG, MICHAEL T
Address: 3425 BRIAN ROAD S.
City-St-Zip: PALM HARBOR, FL 34685

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA WILKEY

VPD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date