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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 716652

1. Corporation Name

MAIN BOULEVARD ASSOCIATION, INC.

Principal Place of Business

230 SOUTH BLVD
 HIGH POINT III
 BOYNTON BEACH FL 33435

Mailing Address

230 SOUTH BLVD
 HIGH POINT III
 BOYNTON BEACH FL 33435



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

06/02/1969

4. FEI Number

59-1378501

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

ROBERTS, ELAINE
 280-C SOUTH BLVD
 BOYNTON BEACH FL 33435

10. Name and Address of New Registered Agent

81 Name NED E. SMITH

82 Street Address (P.O. Box Number is Not Acceptable)
 345 @ MAIN BLVD.

83 BOYNTON BCH.

84 City FL 85 Zip Code 33435

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Ned E. Smith - President BRD OF DIRECTORS

3/16/99

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE VD DELETE
 NAME BOJAN, HARRY
 STREET ADDRESS 265 B SOUTH BLVD
 CITY-ST-ZIP BOYNTON BEACH FL

TITLE S DELETE
 NAME CORSCADDEN, MARIE
 STREET ADDRESS 430 N BLVD PA
 CITY-ST-ZIP BOYNTON BEACH FL

TITLE SD DELETE
 NAME SMITH, NED
 STREET ADDRESS 345 C MAIN BLVD
 CITY-ST-ZIP BOYNTON BEACH FL

TITLE TD DELETE
 NAME MORENO, BETTY
 STREET ADDRESS 440-C NORTH BLVD
 CITY-ST-ZIP BOYNTON BEACH FL

TITLE D DELETE
 NAME DOLLY, THOMAS
 STREET ADDRESS 260 D SOUTH BLVD
 CITY-ST-ZIP BOYNTON BEACH FL

TITLE ASD DELETE
 NAME SMITH, BETTY ANNE
 STREET ADDRESS 345-C MAIN BLVD
 CITY-ST-ZIP BOYNTON BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE D Change Addition
 3.2 NAME PATRICIA McMEHEN
 3.3 STREET ADDRESS 275 D. SOUTH BLVD,
 3.4 CITY-ST-ZIP BOYNTON BCH. FL

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE VD Change Addition
 5.2 NAME RICHARD McMEHEN
 5.3 STREET ADDRESS 275 D. SOUTH BLVD
 5.4 CITY-ST-ZIP BOYNTON BCH. FL 33435

6.1 TITLE AP Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ned E. Smith

3/16/99

561-737-2219

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)