

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009650

Entity Name: MELBOURNE MAIN STREET, INC.**Current Principal Place of Business:**1908 MUNICIPAL LANE
MELBOURNE, FL 32901**Current Mailing Address:**P O BOX 754
MELBOURNE, FL 32901**FEI Number:** 34-1977660**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HICKS, STEVEN
843 E NEW HAVEN AVE
MELBOURNE, FL 32904-0754 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:** STEVEN HICKS

03/28/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name LEWIS, MARK
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902-0754

Title DIRECTOR
Name OATES, GARAT
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title D
Name NUGNES, MATT
Address P.O. BOX 754
City-State-Zip: MELBOURNE FL 32902

Title CEO
Name EISENBERG, JARIN R
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name SPATOLA, BRIAN
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name BRIAN, ELLISON
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name LUCAS, JOHN
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name HICKS, STEVEN
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

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I hereby 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 all other like empowered.

SIGNATURE: JARIN R. EISENBERG**EXECUTIVE DIRECTOR**

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name OROS, ELIZABETH
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name SAYLORS, LEEANNE
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name GRAHAM, KYLE
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name KRISANDA, MICHAELA
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name LARNED, JESSICA
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name CLOVER, JULIE
Address 1908 MUNICIPAL LANE
City-State-Zip: MELBOURNE FL 32901