

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009650

Entity Name: MELBOURNE MAIN STREET, INC.**Current Principal Place of Business:**2004 VERNON PLACE
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:**MARCINKOWSKI, MARIE NICOLETTE OFFICE MANAGER
2004 VERNON PLACE
MELBOURNE, FL 32901 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:** MARIE N MARCINKOWSKI

04/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title SECRETARY
Name LARNED, JESSICA
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32901

Title TREASURER
Name GRAHAM, KYLE
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32901

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

Title PRESIDENT
Name FARRISH, JIM
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32901

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

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

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: KYLE GRAHAM

TREASURER

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date