

2021 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 32902 US**FEI Number:** 34-1977660**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AGEE, KIM
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:** KIM AGEE

01/20/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SKURLA, MARTY
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title SECRETARY
Name DONOGHUE, GREG
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name AROCENA, FEDERICO
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title GOVERNANCE
Name PICKETT, ANDREW
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name MCGUIRE, ALEXIS
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title BOARD CHAIR
Name RUNTE, COREY
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name ECKERT, ALFIE
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name BOYD, JESSIE
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

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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: ALICE HEALEY

ADMIN ASSISTANT

01/20/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HOUSTON, SARA
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title TREASURER
Name LOCKE, TERRY
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name WATTS, MARTI
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title DIRECTOR
Name CABLE, DAVID
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902

Title CHAIR ELECT
Name LUER, BERT
Address P O BOX 754
City-State-Zip: MELBOURNE FL 32902