

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009357

Entity Name: KISSIMMEE MAIN STREET PROGRAM, INCORPORATED**Current Principal Place of Business:**421 BROADWAY
KISSIMMEE, FL 34741**Current Mailing Address:**421 BROADWAY
KISSIMMEE, FL 34741**FEI Number:** 20-1867527**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEFKEK, BRIANNE E
421 BROADWAY
KISSIMMEE, FL 34741 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:** BRIANNE E STEFEK

06/16/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name WOLFF, JEFF
Address 1503 REGAL COVE BLVD
City-State-Zip: KISSIMMEE FL 34744

Title TREA
Name WEYRAUCH, SCOTT
Address 1511 BETH ANN CT.
City-State-Zip: KISSIMMEE FL 34744

Title DIRE
Name GENT, CHRIS
Address 1701 W. CARROLL ST.
City-State-Zip: KISSIMMEE FL 34741

Title DIRE
Name HUTCHINS, CAROLYN
Address 2207 ANTIGUA PLACE
726
City-State-Zip: KISSIMMEE FL 34741

Title DIRE
Name CROHE, DAVE
Address 8 N. STEWART AVE.
City-State-Zip: KISSIMMEE FL 34741

Title VP
Name THACKER, CELIA
Address 23 ADAMS AVE
City-State-Zip: KISSIMMEE FL 34744

Title DIRE
Name HOLLAND, CRAIG
Address 408 SUN AVE
City-State-Zip: KISSIMMEE FL 34741

Title DIRE
Name KRIVINCHUK, JEREMIAH
Address 2411 E. IRLO BRONSON HWY
City-State-Zip: KISSIMMEE FL 34744

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: JEFF WOLFF

PRESIDENT

06/16/2014

Electronic Signature of Signing Officer/Director Detail

Date