

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007495

**Entity Name:** MAIN STREET BLOUNTSTOWN, INC**Current Principal Place of Business:**20741 CENTRAL AVE E  
BLOUNTSTOWN, FL 32424**Current Mailing Address:**PO BOX 135  
BLOUNTSTOWN, FL 32424 US**FEI Number: 81-4319128****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WALDEN, ROBERT BENJAMIN  
20187 NW EVANS AVE  
BLOUNTSTOWN, FL 32424 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: ROBERT BENJAMIN WALDEN****04/09/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name NEAVES, MARY SUE  
Address 18848 NE WOODMONT DR  
City-State-Zip: BLOUNTSTOWN FL 32424

Title BOARD MEMBER  
Name DAVIS, SAMUEL  
Address 16318 SE RIVER STREET  
City-State-Zip: BLOUNTSTOWN FL 32424

Title BOARD MEMBER  
Name ALDERMAN, LISA L  
Address 20323 NE MARIE AVE  
City-State-Zip: BLOUNTSTOWN FL 32424

Title BOARD MEMBER  
Name TERRY, KRISTY  
Address 20816 CENTRAL AVE E  
City-State-Zip: BLOUNTSTOWN FL 32424

Title SECRETARY, TREASURER  
Name MCCRONE, SHARON  
Address 25712 NE ST RD 69  
City-State-Zip: BLOUNTSTOWN FL 32424

Title BOARD MEMBER  
Name MONTFORD, VICKI  
Address 17665 NE PEAR STREET  
City-State-Zip: BLOUNTSTOWN FL 32424

Title BOARD MEMBER  
Name GASKIN, BILL  
Address 16236 ST RD 71 S  
City-State-Zip: BLOUNTSTOWN FL 32424

*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: SHARON MCCRONE****TREASURER****04/09/2020**

Electronic Signature of Signing Officer/Director Detail

Date