

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003408

Entity Name: MAIN STREET INSURANCE GROUP, INC.**FILED**
Feb 21, 2023
Secretary of State
1287239671CC**Current Principal Place of Business:**123 EAST MAIN ST
FOREST CITY, NC 28043**Current Mailing Address:**123 EAST MAIN ST
FOREST CITY, NC 28043 US**FEI Number: 56-2185489****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title PRESIDENT, DIRECTOR
Name FLACK, CHARLES Z III
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title DIRECTOR
Name FLACK, THOMAS C
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title DIRECTOR
Name KATZMAN, CRAIG
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title BOARD CHAIRMAN
Name SWIMMER, DAVID A
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title DIRECTOR
Name FRAZIER, MATTHEW THOMAS
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title DIRECTOR, SECRETARY,
TREASURER
Name BRADY, STEPHEN H
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043Title DIRECTOR
Name FLACK, CHARLES Z IV
Address 123 EAST MAIN ST
City-State-Zip: FOREST CITY NC 28043*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.***SIGNATURE: CHARLES Z. FLACK III****PRESIDENT****02/21/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date