

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 16, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000005909

1. Entity Name
FLORIDA MAINSTREET MERCHANTS, INC.



Principal Place of Business
227 SOUTH ADAMS ST.
TALLAHASSEE, FL 32302

Mailing Address
227 SOUTH ADAMS ST.
TALLAHASSEE, FL 32302



05132008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
32-0026588

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RICHARD A. MCALISTER
227 S ADAM STREET
TALLAHASSEE, FL 32301

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCALLISTER, RICHARD A
STREET ADDRESS	227 S. ADAMS STREET
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	MILLER, PARK R
STREET ADDRESS	227 S. ADAMS STREET
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	ROGERS, JOHN A JR.
STREET ADDRESS	227 S. ADAMS STREET
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/04/08-80040-009 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard A. McAllister
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/2008
Date

850-222-4082
Daytime Phone #