

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008293

FILED
Feb 16, 2011
Secretary of State

Entity Name: WILTON MANORS MAIN STREET, INC.

Current Principal Place of Business:

2164 WILTON DR.
WILTON MANORS, FL 33305

New Principal Place of Business:

Current Mailing Address:

2164 WILTON DR.
WILTON MANORS, FL 33305

New Mailing Address:

FEI Number: 14-1852724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNALL & CADOGAN, PL
101 NE THIRD AVENUE
SUITE 1120
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: MANNERS, KRISHAN
Address: 1609 NW 5TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: VP
Name: TABOR, TOM
Address: 3304 NE 40TH ST
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: TRES
Name: POOLE, CHUCK
Address: 2217 NW 7TH AVE
City-St-Zip: WILTON MANORS, FL 33311 US

Title: SEC
Name: REISSNER, FRED
Address: 2601 NE 14TH AVE, APT 400
City-St-Zip: WILTON MANORS, FL 33334 US

Title: CM
Name: CLINE, DIANE
Address: 2325 NE 19TH AVE
City-St-Zip: WILTON MANORS, FL 33305 US

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: CHUCK POOLE

TRES

02/16/2011

Electronic Signature of Signing Officer or Director

Date