

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N05000001141

1. Entity Name
LWR MAIN STREET OWNERS ASSOCIATION, INC.



Principal Place of Business

401 N. CATTLEMEN ROAD
SUITE 108
SARASOTA, FL 34232

Mailing Address

401 N. CATTLEMEN ROAD
SUITE 108
SARASOTA, FL 34232

FILED
May 04, 2007 08:00 A
Secretary of State



04192007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0535048	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GREENE, ROBERT F
1301 - 6TH AVENUE WEST
SUITE 400
BRADENTON, FL 34205

**DO NOT WRITE
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 May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, DREW 401 N. CATTLEMEN ROAD, SUITE 108 SARASOTA, FL 34232
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PERKA, DANIEL J 6215 LORRAINE ROAD BRADENTON, FL 34202
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUTCHENS, J. BRETT 401 N. CATTLEMEN ROAD, STE. 108 SARASOTA, FL 34232
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/25/07-80067-008 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:

Brett Hutchens

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07

Date

941-552-2700

Daytime Phone #