

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 09, 2007 8:00 am**  
**Secretary of State**

05-09-2007 90114 046 \*\*\*\*61.25

**DOCUMENT # N06385**  
 1. Entity Name  
**MAIN STREET BARTOW, INCORPORATED**



Principal Place of Business Mailing Address  
 160 E SUMMERLIN ST P O BOX 1351  
 SUITE 208 BARTOW FL 33831  
 BARTOW FL 33830 US  
 US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State City & State

4. FEI Number 59-2618876 Applied For Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent  
 DUANE, JAMES O  
 160 E SUMMERLIN ST  
 SUITE 208  
 BARTOW FL 33830

7. Name and Address of New Registered Agent  
 Name Mikel Dorminy  
 Street Address (P.O. Box Number is Not Acceptable) 160 E Summerlin St  
 Suite 208  
 City Bartow FL Zip Code 33830

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 *M. Dorminy*, Program Manager April 27, 2007  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

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

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	BREWER, DAVID	
STREET ADDRESS	1510 N. PARK AVE	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MCLAUGHLIN, MISSY	
STREET ADDRESS	365 E. MAIN ST	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HANSON, SUE	
STREET ADDRESS	135 S CENTRAL AVE	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE	SD	<input type="checkbox"/> Delete
NAME	STILLEY, KATHRYN	
STREET ADDRESS	600 N BROADWAY AVE	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HYNES, JAMIE	
STREET ADDRESS	195 S CENTRAL AVE	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE	D	<input type="checkbox"/> Delete
NAME	DANIELS, JENNIFER	
STREET ADDRESS	1470 US HWY. 17 S.	
CITY-ST-ZIP	BARTOW FL 33830	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	113 E Main St	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brewer, Susie	
STREET ADDRESS	113 E Main St	
CITY-ST-ZIP	Bartow FL 33830	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fowler, Avril	
STREET ADDRESS	6283 Tish Rd	
CITY-ST-ZIP	Bartow FL 33830	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Sue Hanson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/07 863-519-0508  
Date Daytime Phone #

ATTACHMENT  
40109805  
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#NO6385-

D  
Lewis, Clifton  
790 Waldon Ave.  
Bartow, FL 33830

D  
Robertson-Burnett, George  
555 E. Stanford St.  
Bartow, FL 333830

D  
Stasiak, Lindsay  
1470 US Hwy. 17 S.  
Bartow, FL 33830

D  
Wade, Dawn  
190 S. Florida Ave.  
Bartow, FL 33830

D  
Walkup, Tom  
1550 Harbor Way  
Bartow, FL 33830

D  
Weldon, Linda  
450 N. Wilson Ave.  
Bartow, FL 33830