

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19070

FILED
Feb 13, 2009
Secretary of State

Entity Name: LAKE WALES MAIN STREET, INC.

Current Principal Place of Business:

201 W. CENTRAL AVE.
LAKE WALES, FL 33853 US

New Principal Place of Business:

225 E STUART AVE.
LAKE WALES, FL 33853 US

Current Mailing Address:

201 W. CENTRAL AVE.
LAKE WALES, FL 33853 US

New Mailing Address:

225 E STUART AVE.
LAKE WALES, FL 33853 US

FEI Number: 59-2774401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELLETIER, DOLLY
201 W. CENTRAL AVE.
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

PRIVETT, JANET
225 E STUART AVE
LAKE WALES, FL 33853 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: JANET PRIVETT

02/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEDERSEN, LISA
Address: 249 E STUART AVENUE
City-St-Zip: LAKE WALES, FL 33853 US

Title: VD () Delete
Name: HAMMOND, TODD
Address: 229 E STUART AVENUE
City-St-Zip: LAKE WALES, FL 33853 US

Title: TD () Delete
Name: ADKINSON, JOHN
Address: 222 SR 60 EAST
City-St-Zip: LAKE WALES, FL 33853 US

Title: S () Delete
Name: WAJCIK, BEN
Address: 340 W CTRL AVE
City-St-Zip: LAKE WALES, FL 33853 US

Title: D () Delete
Name: PERCY, MEL
Address: 254 E STUART AVE
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: MCCLENON, JAY
Address: 240 PRK AVE E
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: HAMMOND, TODD
Address: 254 E STUART AVE, STE 203
City-St-Zip: LAKE WALES, FL 33853 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: WOJCIK, BETTY
Address: 340 W CTRL AVE
City-St-Zip: LAKE WALES, FL 33853 US

Title: D (X) Change () Addition
Name: GOUVELLIS, JIM
Address: 140 E STUART AVE
City-St-Zip: LAKE WALES, FL 33853

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LISA PEDERSEN

PD

02/13/2009

Electronic Signature of Signing Officer or Director

Date