2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007
Secretary of State

DOCUMENT# N23795

Entity Name: MAIN STREET FORT PIERCE, INC.

Current Principal Place of Business:

122 A.E. BACKUS AVE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

122 A.E. BACKUS AVE
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 59-2879654 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TILLMAN, DORIS
122 A.E. BACKUS AVE
FORT PIERCE, FL 34950 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:	DT	( ) Delete
Name:	MILLER, DAVID	
Address:	2400 S. OCEAN DRIVE #3926	
City-St-Zip:	FORT PIERCE, FL 34949	
Title:	DVP	( ) Delete
Name:	REYNOLDS, BRITT	
Address:	2780 S. BROCKSMITH ROAD	
City-St-Zip:	FORT PIERCE, FL 34945	
Title:	DP	( ) Delete
Name:	SATTERLEE, ANNE	
Address:	2322 CORTEZ AVE	
City-St-Zip:	VERO BEACH, FL 32960	
Title:	DS	( ) Delete
Name:	GILLETTE, PAMELA	
Address:	5105 FEATHER CREEK DRIVE	
City-St-Zip:	FORT PIERCE, FL 34951	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DS	(X) Change ( ) Addition
Name:	DANNAHOWER, SUE	
Address:	2017 S. INDIAN RIVER DRIVE	
City-St-Zip:	FORT PIERCE, FL 34950	

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNE SATTERLEE DP 03/15/2007

Electronic Signature of Signing Officer or Director — Date