## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31392

FILED Jan 11, 2008 Secretary of State

Entity Name: NEW SMYRNA BEACH MAINSTREET, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

412 1/2 CANAL ST 210 DOWNING STREET

P O BOX 641 NEW SMYRNA BCH, FL 32168 NEW SMYRNA BCH, FL 32170

**New Mailing Address: Current Mailing Address:** 

P.O. BOX 641

NEW SMYRNA BEACH, FL 321700641

FEI Number: 26-4117548 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, STEVE KILDAY, EILEEN

334 CANAL ST 210 DOWNING STREET

NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168 US 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: EILEEN KILDAY 01/11/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

GEHMAN, DOUG Name: KILDAY, EILEEN Name:

509 CANAL STREET Address: 210 DOWNING STREET Address: NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168

City-St-Zip: City-St-Zip:

( ) Delete Title: VD Title: ATRE (X) Change ( ) Addition Name:

VARRASSO, JOHN Name: WILLIAMS, SUSAN Address: 402 CANAL STREET Address: 206 LIVE OAK STREET

City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Delete Title: MEM (X) Change ( ) Addition

MCCRACKEN, PATTI DONN, SANDY Name: Name:

426 CANAL STREET Address: Address: FAIRLAWN AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD () Delete Title: LIAI (X) Change ( ) Addition

Name: JONES, STEVE Name: HEISE, FRED Address: 334 CANAL ST Address: 1001 WEST CANAL STREET

City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Delete Title: FINA ( ) Change (X) Addition

JONES, STEVEN Name: Name: 334 CANAL STREET Address: Address:

City-St-Zip: City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Delete Title: ( ) Change (X) Addition

GEHMAN, DOUG Name: Name: Address: Address: 233 NORTH CAUSEWAY

NEW SMYRNA BEACH, FL 32169 City-St-Zip: 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: EILEEN KILDAY **TREA** 01/11/2008

Electronic Signature of Signing Officer or Director

Date