

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 31, 2004
Secretary of State**

DOCUMENT# N93000004150

Entity Name: SANFORD MAIN STREET, INC.

Current Principal Place of Business:

230 E. FIRST STREET
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1741
SANFORD, FL 32772 US

New Mailing Address:

P O BOX 2262
SANFORD, FL 32772 US

FEI Number: 59-3191854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRCHOFF, BILL
2044 HIBISCUS COURT
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

KIRCHHOFF, BILL
2044 HIBISCUS COURT
SANFORD, FL 32771 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: BILL KIRCHHOFF

08/31/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KIRCHOFF, BILL
Address: P.O. BOX 1741
City-St-Zip: SANFORD, FL 32772

Title: VPD (X) Delete
Name: DUNN, JIM
Address: 201 N MAPLE AVE
City-St-Zip: SANFORD, FL 32771

Title: SD () Delete
Name: WEINBERG, ALICE
Address: 1101 E 1ST STREET
City-St-Zip: SANFORD, FL 32771

Title: TD () Delete
Name: LOWELL, GARY
Address: 121 N SUMMERLIN
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KIRCHHOFF, BILL
Address: P.O. BOX 2262
City-St-Zip: SANFORD, FL 32772

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

Title: SD (X) Change () Addition
Name: KONIG, SHARON
Address: 212 EAST FIRST ST
City-St-Zip: SANFORD, FL 32771

Title: TD (X) Change () Addition
Name: VOLK, BRIAN
Address: 531 NORTH PALMETTO AVE
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BILL KIRCHHOFF

PD

08/31/2004

Electronic Signature of Signing Officer or Director

Date