

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002849

FILED
Mar 25, 2010
Secretary of State

Entity Name: HAINES CITY MAINSTREET AND MERCHANTS ASSOCIATION, INC.

Current Principal Place of Business:

235 NORTH 9TH ST
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

235 NORTH 9TH ST
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-3252089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDIVER, FRANCES
9111 LAKE HATCHINEHA RD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

WOOD, RONALI
235 NORTH 9TH STREET
HAINES CITY, FL 33844 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: RONALI WOOD

03/25/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: PRINCE, BRUCE
Address: 235 NORTH 9TH ST
City-St-Zip: HAINES CITY, FL 33844

Title: V P
Name: LEARY, STEVE
Address: 8687 W. IRLO BRONSON MEMORIAL HWY STE 200
City-St-Zip: KISSIMMEE, FL 34747

Title: S
Name: FREEMAN, BOBBI
Address: 708 JONES AVE.
City-St-Zip: HAINES CITY, FL 33844

Title: T
Name: MCCARTER, ELLEN
Address: 36250 HIGHWAY 27
City-St-Zip: HAINES CITY, FL 33844

Title: EX D
Name: WOOD, RONALI
Address: 235 NORTH 9TH STREET
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: RONALI WOOD

EX D

03/25/2010

Electronic Signature of Signing Officer or Director

Date