

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002261

FILED
Jul 20, 2006
Secretary of State

Entity Name: ORMOND MAIN STREET, INC.

Current Principal Place of Business:

160 E. GRANADA BLVD
ORMOND BEACH, FL 32175 US

New Principal Place of Business:

160 E. GRANADA BLVD
ORMOND BEACH, FL 32174 US

Current Mailing Address:

P.O. BOX 2917
ORMOND BEACH, FL 321752917

New Mailing Address:

P.O. BOX 2917
ORMOND BEACH, FL 321752917 US

FEI Number: 59-3311218 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BURT, DORIAN
203 PINE CONE TRAIL
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

PARTINGTON, WILLIAM E II
1284 FERNWAY DR
ORMOND BEACH, FL 32174 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: WILLIAM E. PARTINGTON II

07/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, BILL
Address: P.O. BOX 2917
City-St-Zip: ORMOND BEACH, FL 32175

Title: D () Delete
Name: MARRINACCIO, LEN
Address: P.O. BOX 2917
City-St-Zip: ORMOND BEACH, FL 32175

Title: D () Delete
Name: MARTIN, DOUG
Address: P.O. BOX 2917
City-St-Zip: ORMOND BEACH, FL 32175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCOY, LYNN
Address: P.O. BOX 2917
City-St-Zip: ORMOND BEACH, FL 321752917

Title: VPD (X) Change () Addition
Name: SELBY, DWIGHT
Address: P.O. BOX 2917
City-St-Zip: ORMOND BEACH, FL 321752917

Title: TD (X) Change () Addition
Name: PARTINGTON, WILLIAM E II
Address: 54 W. GRANADA BLVD.
City-St-Zip: ORMOND BEACH, FL 32174

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: WILLIAM E. PARTINGTON II

TD

07/20/2006

Electronic Signature of Signing Officer or Director

Date