

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002261

FILED  
Feb 22, 2010  
Secretary of State

Entity Name: ORMOND MAIN STREET, INC.

**Current Principal Place of Business:**

15 W GRANADA BLVD.  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

11B W GRANADA BLVD.  
ORMOND BEACH, FL 32174 US

**Current Mailing Address:**

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

**New Mailing Address:**

FEI Number: 59-3311218      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PARTINGTON, WILLIAM E II  
1284 FERNWAY DR  
ORMOND BEACH, FL 32174 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: TD  
Name: COOPER, RICHARD  
Address: P. O. BOX 2917  
City-St-Zip: ORMOND BEACH, FL 321752917

Title: SD  
Name: PARTINGTON, WILLIAM E II  
Address: P.O. BOX 2917  
City-St-Zip: ORMOND BEACH, FL 321752917

Title: PD  
Name: HUNDREDMARK, RYCK  
Address: PO BOX 2917  
City-St-Zip: ORMOND BEACH, FL 321752917

Title: VPD  
Name: STEIN, JUDITH  
Address: PO BOX 2917  
City-St-Zip: ORMOND BEACH, FL 321752917

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: RICHARD COOPER

TD

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date