2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N95000002709

Entity Name: MAIN STREET WINTER HAVEN, INC.

Current Principal Place of Business:

52 THIRD STREET, NW
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 32
WINTER HAVEN, FL 33882 US

New Mailing Address:

FEI Number: 59-3319831 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DORMAN, WILLIAM K
150 THIRD STREET, SW
WINTER HAVEN, FL 33880 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:	P/D	( ) Delete
Name:	DORMAN, WILLIAM K	
Address:	150 THIRD STREET, SW	
City-St-Zip:	WINTER HAVEN, FL 33880 US	
Title:	VP/D	( ) Delete
Name:	SHAPIRO, RICHARD	
Address:	455 SIXTH STREET, NW	
City-St-Zip:	WINTER HAVEN, FL 33881 US	
Title:	S/D	( ) Delete
Name:	HAZELWOOD, CHRIS	
Address:	220 W. CENTRAL AVE	
City-St-Zip:	WINTER HAVEN, FL 33880 US	
Title:	T/D	( ) Delete
Name:	BRINSON, KEMP	
Address:	255 MAGNOLIA AVENUE	
City-St-Zip:	WINTER HAVEN, FL 33880 US	
Title:	PP/D	(X) Delete
Name:	KING, HOWARD	
Address:	500 E. CENTRAL AVE.	
City-St-Zip:	WINTER HAVEN, FL 33880 US	
Title:	D	(X) Delete
Name:	EVANS, BETH	
Address:	2105 DUNDEE RD	
City-St-Zip:	WINTER HAVEN, FL 33880 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP/D	(X) Change ( ) Addition
Name:	DUFFY-YOUNG, MARLENE	
Address:	200 AVE B, NW, STE 210	
City-St-Zip:	WINTER HAVEN, FL 33881 US	
Title:	S/D	(X) Change ( ) Addition
Name:	EVANS, BETH	
Address:	2105 DUNDEE RD	
City-St-Zip:	WINTER HAVEN, FL 33880 US	
Title:	T/D	(X) Change ( ) Addition
Name:	HOWARD, KING	
Address:	500 E. CENTRAL AVE	
City-St-Zip:	WINTER HAVEN, FL 33880	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: WILLIAM K. DORMAN PR 04/29/2008

Electronic Signature of Signing Officer or Director — Date