## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000002709

Entity Name: MAIN STREET WINTER HAVEN, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

52 THIRD STREET, NW

WINTER HAVEN, FL 33881 US

Current Mailing Address: New Mailing Address:

P.O. BOX 32

WINTER HAVEN, FL 33882 US

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

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

DORMAN, WILLIAM K

150 THIRD STREET, SW

WINTER HAVEN, FL 33880 US

BRINSON, KEMP

500 S. FLORIDA AVE.

STE 800

LAKELAND, FL 33801 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: KEMP BRINSON 04/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P/D ( ) Delete Title: P/D (X) Change ( ) Addition

Name: DORMAN, WILLIAM K Name: KING, HOWARD
Address: 150 THIRD STREET, SW Address: P.O. BOX 32

City-St-Zip: WINTER HAVEN, FL 33880 US City-St-Zip: WINTER HAVEN, FL 33882 US

Title: VP/D ( ) Delete Title: VP/D (X) Change ( ) Addition Name: DUFFY-YOUNG, MARLENE Name: HORN, ANITA

 Address:
 200 AVE B, NW, STE 210
 Address:
 329 W. CENTRAL AVE.

 City-St-Zip:
 WINTER HAVEN, FL 33881 US
 City-St-Zip:
 WINTER HAVEN, FL 33880 US

Title: S/D () Delete Title: S/D (X) Change () Addition Name: EVANS, BETH Name: CASSIDY, MICHELLE

 Address:
 2105 DUNDEE RD
 Address:
 250 AVENUE K, SW, SUITE 103

 City-St-Zip:
 WINTER HAVEN, FL 33880 US
 City-St-Zip:
 WINTER HAVEN, FL 33880 US

Title: T/D ( ) Delete Title: T/D (X) Change ( ) Addition

 Name:
 HOWARD, KİNG
 Name:
 BRINSON, KEMP

 Address:
 500 E. CENTRAL AVE
 Address:
 500 S. FLORIDA AVE., STE 800

 City-St-Zip:
 WINTER HAVEN, FL 33880
 City-St-Zip:
 WINTER HAVEN, FL 33801

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: HOWARD KING P/D 04/30/2009