2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N98000004354

Entity Name: DANIA BEACH MAIN STREET, INC.

Current Principal Place of Business:

P.O. BOX 1398
DANIA BEACH, FL 33004 US

New Principal Place of Business:

501 SW 4TH AVENUE
DANIA BEACH, FL 33004 US

Current Mailing Address:

PO BOX 1398
DANIA BEACH, FL 33004 US

New Mailing Address:

FEI Number: 65-0859750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ETLING, JOHN
1068 SE 6TH AVE
DANIA, FL 33004 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	( ) Delete
Name:	SILVERNALE, JUNE	
Address:	275 SW 9 ST.	
City-St-Zip:	DANIA BEACH, FL 33004	
Title:	VD	( ) Delete
Name:	JASON, GEORGE	
Address:	4549 SW 37 AVE.	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	TD	( ) Delete
Name:	PYE, MICHAEL T	
Address:	11 N FEDERAL HWY	
City-St-Zip:	DANIA BEACH, FL 33004	
Title:	SD	( ) Delete
Name:	JENSEN, JUDITH	
Address:	46 SE 6 ST.	
City-St-Zip:	DANIA BEACH, FL 33004	
Title:	D	( ) Delete
Name:	LAUBACH, VICTORIA	
Address:	4601 SW 42 TERRACE	
City-St-Zip:	FORT LAUDERDALE, FL 33314	
Title:	D	( ) Delete
Name:	LIZANA, ROSE	
Address:	214 SW 2ND ST	
City-St-Zip:	DANIA BEACH, FL 33004	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JUNE SILVERNALE PD 04/25/2007
Electronic Signature of Signing Officer or Director — Date