## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # P02000098699**

1. Entity Name

MAIN STREET BUILDING OF THONOTOSASSA, INC.



**FILED** Feb 05, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

1206 MILLENNIUM PARKWAY

SUITE 2000 BRANDON, FL 33511 Mailing Address

PO BOX 2638

BRANDON, FL 33509-2638



DO NOT WRITE IN THIS SPACE

01052007 No Chg-P

CR2E034 (11/05)

4. FEI Number 38-3698872

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SULLIVAN, JOHN E 1206 MILLENNIUM PARKWAY **SUITE 2000** BRANDON, FL 33511

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the patient of registered agent.	purpose of changing its register	ed office or	registered agent, or both,	in the State of Florida. I am (amiliar with, and accept
SIGNATURE.			<u>.</u>		
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered				Agent signature required when rewastating) DATE	
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	<ol> <li>Election Campaign Finar Trust Fund Contribution.</li> </ol>	ncing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SULLIVAN, JOHN E 1206 MILLENNIUM PARKWAY, SUITE 2000 BRANDON, FL 33511				000000620301 02/09/07-80031-013 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all gine like impowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED