

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002359

**Entity Name:** HAVANA MAIN STREET INC.**Current Principal Place of Business:**312 1ST STREET NW  
HAVANA, FL 32333**Current Mailing Address:**PO BOX 346  
HAVANA, FL 32333 US**FEI Number:** 82-0711823**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOMBARDO, ANTHONY  
312 1ST STREET NW  
HAVANA, FL 32333 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	PAUL, TERRI
Address	3508 TRILLUM CT
City-State-Zip:	TALLAHASSEE FL 32312

Title	TREASURER
Name	KENT, KAREN
Address	102 E 5TH AVE
City-State-Zip:	HAVANA FL 32333

Title	DIRECTOR
Name	KOZELISKI, ANN E
Address	114 REECE PARK LANE
City-State-Zip:	TALLAHASSEE FL 32301

Title	VP
Name	BERT, NICK
Address	406 LIVE OAK LANE W
City-State-Zip:	HAVANA FL 32333

Title	SECRETARY
Name	CUMBIE, NESTA
Address	404 LIVEOAK LANE
City-State-Zip:	HAVANA FL 32333

Title	DIRECTOR
Name	LOMBARDO, ANTHONY
Address	9120 SHOAL CREEK DRIVE
City-State-Zip:	TALLAHASSEE FL 32312

*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: KAREN KENT****TREASURER****01/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date