

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23795

**Entity Name:** MAIN STREET FORT PIERCE, INC.

**Current Principal Place of Business:**

122 A.E. BACKUS AVE  
FORT PIERCE, FL 34950

**Current Mailing Address:**

122 A.E. BACKUS AVE  
FORT PIERCE, FL 34950

**FEI Number:** 59-2879654

**Certificate of Status Desired:** No

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

TILLMAN, DORIS  
122 A.E. BACKUS AVE  
FORT PIERCE, FL 34950 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 DT  
Name MILLER, DAVID  
Address 2400 S. OCEAN DRIVE #3926  
City-State-Zip: FORT PIERCE FL 34949

Title VDP  
Name REYNOLDS, BRITT  
Address 2780 S. BROCKSMITH ROAD  
City-State-Zip: FORT PIERCE FL 34945

Title DP  
Name WILLIAMS, BETH  
Address 203 MARINA DRIVE  
City-State-Zip: VERO BEACH FL 34949

Title DS  
Name DANNAHOWER, SUE  
Address 2017 S. INDIAN RIVER DRIVE  
City-State-Zip: FORT PIERCE FL 34950

*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:** SUE DANNAHOWER

**DS**

**04/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date