

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000007110

**Entity Name:** ST. CLOUD MAIN STREET, INC.

**Current Principal Place of Business:**

903 PENNSYLVANIA AVE  
ST. CLOUD, FL 34769

**Current Mailing Address:**

903 PENNSYLVANIA AVE  
ST. CLOUD, FL 34769 US

**FEI Number:** 59-3614025

**Certificate of Status Desired:** No

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

STARK, PAULA A  
903 PENNSYLVANIA AVE  
SAINT CLOUD, FL 34769 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            DORSEY, TOM PRESIDENT  
Address        903 PENNSYLVANIA AVE.  
City-State-Zip: ST. CLOUD FL 34769

Title            SECRETARY  
Name            HUESER, RICK  
Address        903 PENNSYLVANIA AVE  
City-State-Zip: ST. CLOUD FL 34769

Title            TREASURER  
Name            GIAMBRONI, LORI  
Address        903 PENNSYLVANIA AVE  
City-State-Zip: ST. CLOUD FL 34769

Title            VP  
Name            LIWAG, MELVIN  
Address        903 PENNSYLVANIA AVE  
City-State-Zip: ST. CLOUD FL 34769

Title            PRESIDENT ELECT  
Name            SCOTT, KERRY  
Address        903 PENNSYLVANIA AVE  
City-State-Zip: ST. CLOUD FL 34769

Title            PAST PRESIDENT  
Name            WELCH, MEL  
Address        903 PENNSYLVANIA AVE  
City-State-Zip: ST CLOUD FL 34769

*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:** TOM DORSEY

ORESIDENT

02/04/2024

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

\_\_\_\_\_ Date