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LARA
LICENSING AND REGULATORY AFFAIRS

STATE OF MICHIGAN
CSCL/CD- 2000 - DOMESTIC NONPROFIT & ECCLESIASTICAL CORPORATION ANNUAL REPORT

Corporations Division Administrator

FILED

Doc #: 27372064
Filed Date: 8/4/2025

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS NONPROFIT CORPORATION ANNUAL REPORT

Required by Section 911, Act 162, Public Act of 1982:

Corporation Information

The present name of the corporation is: MAIN STREET HOLLY

The identification number assigned by the Bureau is: 802134857

Filing Year 2025

☐ On behalf of the corporation, I certify that no changes have occurred in required information since the previously filed report.

The name of the resident agent at the registered office is:

CRISTINA L SHEPPARD-DECIUS

The street address of the location of the registered office is:

504 1/2 EAST MAPLE
HOLLY, MI 48442

☒ I certify the above individual/company has agreed to serve as the Resident Agent for service of process for this entity.

Purpose

The purposes and general nature and kind of business in which the corporation engaged during the year covered by this report:

Charitable work for Main Street Holly.

Officers and Directors

List names and complete addresses of all officers and directors.

Title	Full Name	Address
President	LINDA STOUFFER	504 1/2 EAST MAPLE ST HOLLY, MI 48442
– ~~Secretary~~	~~NICK KLEMPP~~	~~504 1/2 EAST MAPLE ST~~ ~~HOLLY, MI 48442~~
– ~~Treasurer~~	~~JERRY WALKER~~	~~504 1/2 EAST MAPLE ST~~ ~~HOLLY, MI 48442~~
Director	CARI CUCKSEY	504 1/2 EAST MAPLE ST HOLLY, MI 48442
– ~~Director~~	~~NICK KLEMPP~~	~~504 1/2 EAST MAPLE ST~~ ~~HOLLY, MI 48442~~
– ~~Director~~	~~JERRY WALKER~~	~~504 1/2 EAST MAPLE ST~~ ~~HOLLY, MI 48442~~
+ Secretary	HILARY ALLGEYER	504 1/2 EAST MAPLE HOLLY, MI 48442
+ Treasurer	JEROME RASKA	504 1/2 EAST MAPLE HOLLY, MI 48442
+ Director	HOLLY HERRICK	504 1/2 EAST MAPLE HOLLY, MI 48442

☒ Director	DAVID ELLIOTT	504 1/2 EAST MAPLE HOLLY, MI 48442

☐ Check here if the corporation is a private foundation or formed to provide care to a dentally underserved population.

Attestations

☒ I understand that the information I enter into the online system is public information and will appear online and on copy requests exactly as I enter it into the system.

☒ I have been authorized by the business entity to file this document online.

☒ I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.

Signature(s)

Authorized Agent	*Main Street Holly*	*Cristina Sheppard-Decius*	*08/04/2025*
Signer's Capacity	On behalf of	Sign Here	Date