

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Myrtham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

55 MAY - 1 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003769 (7)

1. Corporation Name:

MAIN STREET ZEPHYRHILLS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address

38537 FIFTH AVENUE ZEPHYRHILLS FL 33540

38537 FIFTH AVENUE ZEPHYRHILLS FL 33540

3. Date Incorporated or Qualified 08/16/1993

3a. Date of Last Report 05/01/1994

4. FEI Number 59-3192201

Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

HERMAN, STEVEN
38537 FIFTH AVENUE
ZEPHYRHILLS FL 33525

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HERMAN, EILEEN 38537 FIFTH AVE ZEPHYRHILLS FL 33540	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY, ST, ZIP		14 CITY, ST, ZIP	
TITLE	DV CRAIG-EASTON, CYNTHIA M 5530 GALL BLVD. ZEPHYRHILLS FL	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY, ST, ZIP	
TITLE	DS SPINA, STEVEN F 38939 CAMBRIDGE DR. ZEPHYRHILLS FL	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE	DT BARNES, CHRISTINA 5629 PROSPER CT. ZEPHYRHILLS FL 33540	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE	D BOAN, DAN 4546 BLOSSOM DR ZEPHYRHILLS FL 33541	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE	D SMITH, LANCE 7025 FORT KING RD ZEPHYRHILLS FL 33541	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Christina L. Barnes* Christina L. Barnes 4/22/95 (813) 788-9994