

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

**FILED**

DOCUMENT# N93000003769

**Apr 14, 2013**

**Entity Name:** MAIN STREET ZEPHYRHILLS, INC.

**Secretary of State  
CC7025905387**

**Current Principal Place of Business:**

5224 7TH STREET  
ZEPHYRHILLS, FL 33542

**Current Mailing Address:**

5224 7TH STREET  
ZEPHYRHILLS, FL 33542 US

**FEI Number: 59-3192201**

**Certificate of Status Desired: No**

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

GRANGER, REGINA K  
5224 7TH STREET  
ZEPHYRHILLS, FL 33542 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 SECRETARY  
Name HATRICK, GARY S  
Address 5510 12TH ST  
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR  
Name BASSINGER, ELAYNE  
Address P.O. BOX 1168  
City-State-Zip: SAN ANTONIO FL 33576

Title PRESIDENT  
Name DREWS, CHRIS  
Address 5214 HALSTEAD LN  
City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR  
Name GRANGER, CHARLES B  
Address 33500 SICKLER DR  
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR  
Name VELEZ, RALPH  
Address 6042 HAZELWOOD DR  
City-State-Zip: ZEPHYRHILLS FL 33542

Title TREASURER  
Name STRAWBRIDGE, JANE  
Address 30434 LETTINGWELL CIR  
City-State-Zip: WESLEY CHAPEL FL 33543

Title DIRECTOR  
Name BREWER, DEREK  
Address 6118 8TH ST  
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR  
Name ABED, HAZEM  
Address 38445 5TH AVE  
City-State-Zip: ZEPHYRHILLS FL 33542

**Continues on page 2**

*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: CHRIS DREWS**

**PRESIDENT**

**04/14/2013**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR

Name LENZ, NILS

Address 37023 PEPPER DR

City-State-Zip: ZEPHYRHILLS FL 33541