2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003769

Entity Name: MAIN STREET ZEPHYRHILLS, INC.

Current Principal Place of Business:

38537 5TH AVE

ZEPHYRHILLS. FL 33542

Current Mailing Address:

38537 5TH AVE

ZEPHYRHILLS, FL 33542 US

FEI Number: 59-3192201 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAIN STREET ZEPHYRHILLS, INC. 38537 5TH AVE

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: ELIZABETH C. KENNEDY 02/01/2021

Electronic Signature of Registered Agent

Date

FILED Feb 01, 2021

Secretary of State

2491591409CC

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** KERNS, LINDA S HARM, MARTIN Name Name 38537 5TH AVE **5239 10TH STREET** Address Address

City-State-Zip: ZEPHYRHILLS FL 33542 ZEPHYRHILLS FL 33542 City-State-Zip:

Title **SECRETARY** Title VΡ Name WOLFE, KEITH Name ALEXANDER, DEVIN Address 5203 17TH ST Address 38537 5TH AVE

ZEPHYRHILLS FL 33542 City-State-Zip: City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR Title **DIRECTOR**

Name BENNETT, CHRISTINE GILDON, ANTWON Name

Address 38537 5TH AVE 38537 5TH AVE Address

City-State-Zip: ZEPHYRHILLS FL 33542 ZEPHYRHILLS FL 33542 City-State-Zip:

Title **OFFICER** Title **OFFICER**

Name VESSELOV, SARAH POSNER, GRANT Name Address 38537 5TH AVE

38537 5TH AVE Address

City-State-Zip: ZEPHYRHILLS FL 33542 ZEPHYRHILLS FL 33542 City-State-Zip:

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.

02/01/2021 SIGNATURE: LINDA KERNS **PRESIDENT**