

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 26 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 729454  
1. Corporation Name  
Hyde Park Preservation, Inc.

Principal Place of Business: 712 S. Fielding Ave, Tampa, FL 33606  
Mailing Address: P.O. Box 2084, Tampa, FL 33601-2084

2. Principal Place of Business, 2a. Mailing Address, 21-24. City, State, Zip, Country

3. Date Incorporated or Qualified: 04/23/1974  
3a. Date of Last Report: 2/96  
4. FEI Number: 59-3095027  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
Redfield, Leslee  
825 So. Edison Ave  
Tampa, FL 33606

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Julie Redfield, Leslee Redfield-Treasurer, 2/20/97

12. OFFICERS AND DIRECTORS

TITLE	B	<input type="checkbox"/> DELETE
NAME	Christine Tollette	
STREET ADDRESS	705 South Newport	
CITY - ST - ZIP	Tampa, FL 33606	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Leslee Redfield	
STREET ADDRESS	825 South Edison Ave	
CITY - ST - ZIP	Tampa, FL 33606	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Tim Hunt	
STREET ADDRESS	705 South Fielding	
CITY - ST - ZIP	Tampa, FL 33606	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Julie R. Redfield, Leslee Redfield-Treasurer, 2/20/97, (813) 254-9476

CR2E037 (9/96)