

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000004597

**FILED**  
**Apr 30, 2004**  
**Secretary of State****Entity Name:** HISTORIC HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**1721 W. HILLS AVE.  
TAMPA, FL 33606**New Principal Place of Business:****Current Mailing Address:**PO BOX 2990  
TAMPA, FL 33606**New Mailing Address:****FEI Number:** 59-3398233**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CARUFEL, JEANNE H  
1721 W. HILLS AVE.  
TAMPA, FL 33606 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOLTON CARUFEL, JEANNE  
Address: 1721 W HILLS AVE  
City-St-Zip: TAMPA, FL 33606

Title: T ( ) Delete  
Name: CUDLIP, ROSEANN  
Address: 2007 W MORRISON AVE  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: JONES, SUSAN  
Address: 1704 W JETTON AVE  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: BILLE, MICHAEL  
Address: 1721 RICHARDSON  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: KENNEDY, SARA  
Address: 610 S NEWPORT  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: ABRAM, NELL  
Address: 2111 DEKLE AVE  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: BRAMS, MELLICENT  
Address: PO BOX 2990  
City-St-Zip: TAMPA, FL 33601

Title: T (X) Change ( ) Addition  
Name: JONES, SUSAN  
Address: 1704 W JETTON AVE  
City-St-Zip: TAMPA, FL 33606

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FARVER, JANINE  
Address: PO BOX 2990  
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change ( ) Addition  
Name: GRAZIANO, DOMENICK  
Address: PO BOX 2990  
City-St-Zip: TAMPA, FL 33601

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEANNE HOLTON CARUFEL

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date

RANDY HOLLINGWORTH, DIRECTOR  
PO BOX 2990  
TAMPA, FL 33601

ENZA AIELLO  
PO BOX 2990  
TAMPA, FL 33601

ROGER GRUNKE, DIRECTOR  
PO BOX 2990  
TAMPA, FL 33601

FRANC URSO, DIRECTOR  
PO BOX 2990  
TAMPA, FL 33601

MICHAEL VILLA, DIRECTOR  
PO BOX 2990  
TAMPA, FL 33601