

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000004597

**FILED**  
**Jan 27, 2016**  
**Secretary of State**  
**CC4872097609**

**Entity Name:** HISTORIC HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

2909 W BAY TO BAY BLVD  
SUITE 108  
TAMPA, FL 33629

**Current Mailing Address:**

PO BOX 2990  
TAMPA, FL 33601 US

**FEI Number: 59-3398233**

**Certificate of Status Desired: No**

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

DEAKIN, BARBARA  
1408 S. DESOTO AVENUE  
TAMPA, FL 33606 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:** BARBARA DEAKIN

01/27/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, TREASURER  
Name DEAKIN, BARBARA  
Address 1408 S. DESOTO AVENUE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR, PRESIDENT  
Name DURDIN, KATHY  
Address 1820 RICHARDSON PLACE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name ALTMAN, ANN  
Address 2109 BAYSHORE BLVD, #705  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name ACOSTA, DEL  
Address 1903 W BRISTOL AVE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name BAILEY, MARYLOU  
Address 810 S PACKWOOD AVE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR, SECRETARY  
Name NORTH, DIANE  
Address 1809 W INMAN AVE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name FASULO, SANDY  
Address 1805 W MORRISON AVE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name PRATER, JEN  
Address 1801 W JETTON AVE  
City-State-Zip: TAMPA FL 33606

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*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:** BARBARA DEAKIN

TREASURER

01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LYNCH, MICHAEL  
Address 720 S BOULEVARD  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name WOZNICKI, MARTI  
Address 701 S PACKWOOD AVE  
City-State-Zip: TAMPA FL 33606

Title DIRECTOR  
Name JACOBSON, LISA  
Address 1812 W JETTON AVE  
City-State-Zip: TAMPA FL 33606