

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004597

FILED
Mar 15, 2021
Secretary of State
7525823962CC

Entity Name: HISTORIC HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

2905 BAYSHORE BLVD
SUITE 200
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
2905 BAYSHORE BLVD
SUITE 200
TAMPA, FL 33629 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

03/15/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title DIRECTOR
Name PICONE, GABRIEL
Address 907 S PACKWOOD AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR EMERITUS
Name SUMMERVILLE, PATRICIA
Address 2107 W DEKLE AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name CIMINO, PATRICK
Address 604 S OREGON AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR, TREASURER
Name DEAKIN, BARBARA
Address 1408 S DE SOTO AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name EACHON, MICHAEL
Address 2104 W DEKLE AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name MCMILLAN, KELLY
Address 2110 W DEKLE AVE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR, PRESIDENT
Name YUSKAITIS, SHAWN
Address 903 S PACKWOOD 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

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title DIRECTOR
Name GUTIERREZ, GREGORY
Address 1813 W WATROUS AVE
,
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name SHELTON, ALAN
Address 2002 W DEKLE AVE
UNIT A
City-State-Zip: TAMPA FL 33606