

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713394

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: HYDE PARK TOWERS, INC.

**Current Principal Place of Business:**

1801 S. OCEAN DR.  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

1801 S. OCEAN DR.  
HOLLYWOOD, FL 33019

**New Mailing Address:**

FEI Number: 59-1209074      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEVY, EDNA  
1801 S OCEAN DRIVE  
APT 204  
HOLLYWOOD, FL 33019 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: PD ( ) Delete  
Name: MANNA, MARIO  
Address: 1801 S OCEAN DR SUITE 505  
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP ( ) Delete  
Name: DOSTELLIO, KEN  
Address: 1801 S OCEAN DR APT 503  
City-St-Zip: HOLLYWOOD, FL 33019

Title: T ( ) Delete  
Name: FUENTES, MARIA E  
Address: 1801 S. OCEAN DRIVE #303  
City-St-Zip: HOLLYWOOD, FL 33019

Title: TD ( ) Delete  
Name: ANTONUCCI, JOE  
Address: 1801 S OCEAN DRIVE APT 508  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D ( ) Delete  
Name: URSINI, PAUL  
Address: 1801 S OCEAN DR APT 604  
City-St-Zip: HOLLYWOOD, FL 33019

Title: S ( ) Delete  
Name: LEVY, EDNA  
Address: 1801 S OCEAN DR #204  
City-St-Zip: HOLLYWOOD, FL 33019

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

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARIA E. FUENTES

TR

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date