

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766318

1. Entity Name

THE OLD HYDE PARK GARDEN CLUB, INC.

FILED

Aug 29, 2000 8:00 am
Secretary of State

08-29-2000 90002 027 ****61.25

Principal Place of Business

718 S ORLEANS AVE
TAMPA FL 33606
US

Mailing Address

718 S ORLEANS AVE
TAMPA FL 33606
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIBBONS, KATIE
912 S DAKOTA AVE
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name Su Lee

Street Address (P.O. Box Number is Not Acceptable)

718 S. Orleans Ave

City

Tampa

FL

Zip Code

33606

8. 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

Su Lee (Treasurer)

8/24/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
PCPD	DIEHL, AMY	832 SOUTH BLVD	TAMPA FL 33606	<input checked="" type="checkbox"/>
SD	JOHNSON, JILL	817 SOUTH EDISON	TAMPA FL 33606	<input checked="" type="checkbox"/>
TD	LEE, SU	718 S ORLEANS AVE	TAMPA FL 33606	<input type="checkbox"/> (OK)
1VPT	THOMPSON, LAUREL	810 SOUTH BLVD	TAMPA FL 33606	<input checked="" type="checkbox"/>
2VPT	ALEXANDER, BROOKE	1008 S DAKOTA	TAMPA FL 33606	<input checked="" type="checkbox"/>
3VPT	HARRELL, ELIZABETH	807 SOUTH DELAWARE	TAMPA FL 33606	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PCPD	Thompson, Laurel	810 South Boulevard	Tampa, FL 33606	<input checked="" type="checkbox"/>
1VPT	Alexander, Brooke	1008 S. Dakota	Tampa, FL 33606	<input checked="" type="checkbox"/>
2VPT	Lari Hudon	835 S. Boulevard	Tampa, FL 33606	<input type="checkbox"/>
3VPT	Elizabeth Harrell	807 S. Delaware	Tampa, FL 33606	<input type="checkbox"/>
Secretary S	Kay Saville	802 S. Orleans Ave	Tampa, FL 33606	<input type="checkbox"/>

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Su Lee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/24/00

Date

813-251-4244

Daytime Phone #

CR2E037 (5/00)