# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2011**
**Secretary of State**

DOCUMENT# 766318

**Entity Name:** THE OLD HYDE PARK GARDEN CLUB, INC.

**Current Principal Place of Business:**

806 S. ORLEANS
TAMPA, FL 33606 US

**New Principal Place of Business:**

718 SOUTH ORLEANS AVE.
TAMPA, FL 33606 US

**Current Mailing Address:**

806 S. ORLEANS
TAMPA, FL 33606 US

**New Mailing Address:**

718 SOUTH ORLEANS AVE.
TAMPA, FL 33606 US

**FEI Number: 59-3685367** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

OVERCASH, JANINE A
806 S. ORLEANS
TAMPA, FL 33606 US

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

LEE, SU U
718
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: SU LEE 04/29/2011
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PD
Name: LEE, SU U
Address: 718 S. ORLEANS
City-St-Zip: TAMPA, FL 33606

Title: VPD
Name: TISH, THORNBERRY
Address: 834 S. WILLOW
City-St-Zip: TAMPA, FL 33606

Title: VPD
Name: ELIZABETH, CHRISTENBERRY
Address: 802 S. ORLEANS
City-St-Zip: TAMPA, FL 33606

Title: TD
Name: LEE, SU
Address: 718 SOUTH ORLEANS AVE.
City-St-Zip: TAMPA, FL 33606

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: SU LEE PD 04/29/2011
Electronic Signature of Signing Officer or Director Date