

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M84639

1. Entity Name

HYDE PARK ZOO, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90037 006 ***150.00

Principal Place of Business

Mailing Address

1624 W SNOW CIR
TAMPA FL 33606
US

1624 W SNOW CIR.
TAMPA FL 33606-2561
US

2. Principal Place of Business

3. Mailing Address

622 Danube Avenue

622 Danube Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tampa, FL

Tampa, FL

Zip

Country

Zip

Country

33606

US

33606

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2892807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PALERMO, JAMES D.
100 S ASHLEY DR
SUITE 1745
TAMPA FL 33602

Name

James D. Palermo

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

622 Danube Avenue

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

Signature, typed or printed name of registered agent and title (Applicable)

JAMES D. PALERMO

(NOTE: Registered Agent signature required when reinstating)

DATE

4/16/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DVP	PALERMO, JAMES D.	1624 W. SNOW CIR.	TAMPA FL	<input type="checkbox"/>
P	PALERMO, JEAN B	1624 W. SNOW CIRCLE	TAMPA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
DVP	Palermo, James D.	622 Danube Avenue	Tampa, FL 33606	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	Palermo, Jean B.	622 Danube Avenue	Tampa, FL 33606	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James D. Palermo

4/16/00

Date

813/253-3213

Daytime Phone #

CR2E034 (9/99)