


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 05, 2006 8:00 am**  
**Secretary of State**

07-05-2006 90003 002 \*\*\*\*70.00

**DOCUMENT # N00000005083**

1. Entity Name  
 SOHO HYDE PARK TOWNHOMES ASSOCIATION, INC.



Principal Place of Business  
 412 S. WESTLAND AVENUE  
 ASSOCIATION  
 TAMPA, FL 33606


Maining Address  
 412 S. WESTLAND AVENUE  
 ASSOCIATION  
 TAMPA, FL 33606

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Maining Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country

40097949



07022006 Chg-NP CR2E037 (4/06)


4. FEI Number  
 59-3731856

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 AVENDANO, NIEL  
 412 S WESTLAND AVENUE  
 #3  
 TAMPA, FL 33606

7. Name and Address of New Registered Agent  
 Name **BAUGUIL, FRANK**  
 Street Address (P.O. Box Number is Not Acceptable)  
~~412 S. WESTLAND AVENUE, #1~~  
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **FRANK BAUGUIL** 7/1/2006

Filing Fee is \$61.25 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	AVENDANO, NIEL			NAME	McBurnie, Michael		
STREET ADDRESS	412 S. WESTLAND AVENUE, #3			STREET ADDRESS	412 S. Westland Avenue, #3		
CITY ST ZIP	TAMPA, FL 33606			CITY ST ZIP	TAMPA, FL 33606		
TITLE	D	<input type="checkbox"/> Delete		TITLE	VIS	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BAUGUIL, FRANK			NAME	Bauguil, Frank		
STREET ADDRESS	412 S. WESTLAND AVENUE, #1			STREET ADDRESS	412 S. Westland Avenue, #1		
CITY ST ZIP	TAMPA, FL 33606			CITY ST ZIP	TAMPA, FL 33606		
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ROBINSON, RICK			NAME			
STREET ADDRESS	412 S. WESTLAND AVENUE, #2			STREET ADDRESS			
CITY ST ZIP	TAMPA, FL 33606			CITY ST ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ANDERSON, DENISE			NAME	Anderson, Denise		
STREET ADDRESS	412 S. WESTLAND AVENUE, #4			STREET ADDRESS	412 S. Westland Avenue, #4		
CITY ST ZIP	TAMPA, FL 33606			CITY ST ZIP	Tampa, FL 33606		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY ST ZIP				CITY ST ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY ST ZIP				CITY ST ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, within a other fee empowered.

SIGNATURE:  **FRANK BAUGUIL** 7/1/2006 813 334 6783