

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 03, 2007  
Secretary of State**

DOCUMENT# N03000004188

**Entity Name:** HYDE PARK COMMUNITY PRESERVATION CORP.

**Current Principal Place of Business:**

10306 OAKVIEW POINTE TERRACE  
GOTHA, FL 34734

**New Principal Place of Business:**

**Current Mailing Address:**

10306 OAKVIEW POINTE TERRACE  
GOTHA, FL 34734

**New Mailing Address:**

**FEI Number:** 05-0572119      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

HOWARD, KENNETH D  
10306 OAKVIEW POINTE TERRACE  
GOTHA, FL 34734    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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

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

Title: PD                    ( ) Delete  
Name: HOWARD, KENNETH D  
Address: 10306 OAKVIEW POINTE TERRACE  
City-St-Zip: GOTHA, FL 34734

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

Title: VTD                    ( ) Delete  
Name: HAWKINS, BOSSIE  
Address: 1410 LOLA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: SD                    ( ) Delete  
Name: MALLORY, EUNICE  
Address: 5014 BALLARD DRIVE  
City-St-Zip: DAYTON, OH 45418

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: KENNETH HOWARD

PD

05/03/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date