

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007556

FILED  
Jan 24, 2006  
Secretary of State

**Entity Name:** THE VALENCIA AT OLD HYDE PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

45 DAVIS BOULEVARD  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

45 DAVIS BOULEVARD  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

JONES, HAMILTON  
45 DAVIS BOULEVARD  
TAMPA, FL 33606 US

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

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:**

Title: D ( ) Delete  
Name: JONES, HAMILTON  
Address: 45 DAVIS BOULEVARD  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: SHEAR, JEFFREY T  
Address: 401 EAST JACKSON STREET, SUITE 2700  
City-St-Zip: TAMPA, FL 33602

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HAMILTON JONES

D

01/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date