

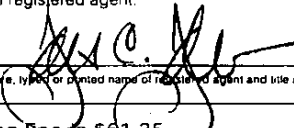
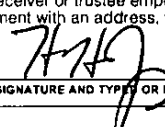


2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90049 028 \*\*\*\*61.25

<b>DOCUMENT # N04000007556</b> 1. Entity Name <b>THE VALENCIA AT OLD HYDE PARK HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>45 DAVIS BOULEVARD TAMPA, FL 33606</b>			Mailing Address <b>45 DAVIS BOULEVARD TAMPA, FL 33606</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. <b>1610-1618 W. De Leon Street</b> City & State <b>Tampa, Florida</b> Zip <b>33606</b>		3. Mailing Address Suite, Apt. #, etc. <b>c/o Jacob Real Estate Services, Inc.</b> <b>607 W. Bay Street</b> City & State <b>Tampa, Florida</b> Zip <b>33606</b>			
4. FEI Number <b>NOT APPLICABLE</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>JONES, HAMILTON 45 DAVIS BOULEVARD TAMPA, FL 33606</b>			7. Name and Address of New Registered Agent Name <b>James C. Jacob</b> Street Address (P.O. Box Number is Not Acceptable) <b>Jacob Real Estate Services, Inc.</b> <b>607 W. Bay Street</b> City <b>Tampa</b> <b>FL</b> Zip Code <b>33606</b>		
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  <small>Signature, typed or printed name of registered agent and title if applicable</small>		<b>James C. Jacob</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE <b>4-14-2008</b>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> Make check payable to <b>Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, HAMILTON 45 DAVIS BOULEVARD TAMPA, FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEAR, JEFFREY T 401 EAST JACKSON STREET, SUITE 2700 TAMPA, FL 33602	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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, with all other like empowered.					
SIGNATURE: 		<b>Hamilton Jones</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>4/15/08</b>	
(813) 259-9898 <small>Daytime Phone #</small>					