


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90173 004 ****61.25

DOCUMENT # N06000004785 1. Entity Name HYDE PARK TOWERS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1001 3RD AVE WEST - STE 300 BRADENTON, FL 34205			Mailing Address 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762		
2. Principal Place of Business - No P.O. Box # 3001 Executive Dr. Suite, Apt. #, etc. Suite 260 City & State Clearwater, FL Zip 33762 Country Pinellas			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 20-5012131			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 <u>Michael Bagluk 4-2-08</u> <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY - ST - ZIP	DP CORBETT, ANTHONY 101 S 12TH ST #308 TAMPA, FL 33602	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP Anthony Corbett 101 S 12TH ST #308 TAMPA FL 33602
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP ZIMMERMAN, DEBORAH 406 W AZEELE ST #106 TAMPA, FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Zimmerman, Deborah 406 W AZEELE ST #106 TAMPA FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT MCNAMEY, MICHAEL 9481 HIGHLAND OAK DR #1416 TAMPA, FL 33647	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS/T Brian Hennessey 1202 GPT ST W BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP Livingston HESSAM 406 W AZEELE ST #102 TAMPA FL 33606
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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/17/08</u> Daytime Phone #: <u>813-494-5320</u>		