2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004785

FILED Mar 20, 2009 Secretary of State

Entity Name: HYDE PARK TOWERS CONDOMINIUM ASSOCIATION, INC.

- 411 - 111	Principal Place	of Business:	New Principal Place of Business:
3001 EXECUTIVE DR STE 260 CLEARWATER, FL 33762			777 S. HARBOUR ISLAND BLVD. SUITE 270 ST. PETERSBURG, FL 33602
Current N	Mailing Addres	ss:	New Mailing Address:
SUITE 260	CUTIVE DRIVE 0 ATER, FL 337		201 E. KENNEDY BLVD SUITE 775 TAMPA, FL 33602
FEI Number	r: 20-5012131	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (
Name and	d Address of C	Current Registered Agent:	Name and Address of New Registered Agent:
3001 EXE SUITE 260 CLEARW The above	ATER, FL 337	E 62 US	JAMES R. DE FURIO, P.A. 201 E. KENNEDY BLVD SUITE 775 TAMPA, FL 33602 US burpose of changing its registered office or registered agent, or
		r. DE FURIO, PA	03/20/2009
31014/110		nic Signature of Registered Ag	
		0 0	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIREC
OFFICER Title: Name: Address: City-St-Zip:	CORBETT, ANT 101 S 12TH ST	Delete THONY #308	ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip: Title: Name: Address:	DVP () CORBETT, ANT 101 S 12TH ST TAMPA, FL 33 D () ZIMMERMAN, I 406 W. AZEEL	Delete THONY #308 602 Delete DEBORAH E ST #106	Title: () Change () Addition Name: Address:
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address:	DVP CORBETT, ANT 101 S 12TH ST TAMPA, FL 33 D ZIMMERMAN, I 406 W. AZEEL TAMPA, FL 33	Delete THONY #308 602 Delete DEBORAH E ST #106 606 Delete RIAN	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Title: Name: Address:	DVP CORBETT, ANT 101 S 12TH ST TAMPA, FL 33 D ZIMMERMAN, I 406 W. AZEEL TAMPA, FL 33 DST HENNESEY, BI 1202 68TH ST BRADENTON, I	Delete HONY #308 602 Delete DEBORAH E ST #106 606 Delete RIAN W FL 34209 Delete HASSAM E ST STE 102	Title: () Change () Addition Name: Address: City-St-Zip: 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 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: LIVINGSTON HESSAM P 03/20/2009