2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N16854

Entity Name: HYDE PARK PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O DANNY WHITE
902 S ROME AVE UNIT B
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

C/O DANNY WHITE
902 S ROME AVE UNIT B
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:

SHAMONSKY, TRACY
11 W PRENTISS AVE
GREENVILLE, FL 29605 US

Name and Address of New Registered Agent:

WHITE, DANNY
902 S ROME AVE UNIT B
TAMPA, FL 33606 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: DANNY WHITE 04/13/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHAMONSKY, TRACY
Address: 11 W PRENTISS AVE
City-St-Zip: GREENVILLE, SC 29605

Title: D ( ) Delete
Name: MCBURNIE, MICHAEL
Address: 902 S. ROME AVE UNIT C
City-St-Zip: TAMPA, FL 33606

Title: DT ( ) Delete
Name: WHITE, DAN
Address: 902 S. ROME AVE. UNIT B
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: MATTHEWS, BOB
Address: 1608 MORRISON AVENUE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DANNY WHITE PRES 04/13/2009
Electronic Signature of Signing Officer or Director Date