

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16854

FILED  
Apr 28, 2011  
Secretary of State

**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:**

WHITE, DANNY  
902 S ROME AVE UNIT B  
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  
Name: SHAMONSKY, TRACY  
Address: 11 W PRENTISS AVE  
City-St-Zip: GREENVILLE, SC 29605

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: DANNY WHITE

AGEN

04/28/2011

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

\_\_\_\_\_  
Date