2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# N18350

Entity Name: HYDE PARK PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

HYDE PARK DR
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

PO BOX 782
GOLDENROD, FL 32733

New Mailing Address:

FEI Number: 59-2803417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHTON, PAUL
3115 ASH PARK LOOP
WINTER PARK, FL 32792 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:	PD	( ) Delete
Name:	REINHARD, RUSSEL	
Address:	1426 HYDE PARK DR	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	S	( ) Delete
Name:	BROADCUP, CHARLES	
Address:	1427 W. BROOKSHIRE CT.	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	M	( ) Delete
Name:	WAGGONER, ADAM	
Address:	3008 LITTLE CYPRESS COVE	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	VD	( ) Delete
Name:	DAVIS, GARY	
Address:	3135 ASH PARK LOOP	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	TD	( ) Delete
Name:	ASHTON, PAUL	
Address:	3115 ASH PARK LOOP	
City-St-Zip:	WINTER PARK, FL 32792	

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:	
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: PAUL ASHTON TD 04/19/2009

Electronic Signature of Signing Officer or Director — Date