

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062470

Entity Name: A.S. HYDE PARK, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

15706 N DALE MABRY
TAMPA, FL 33618 US

New Principal Place of Business:

15706 N DALE MABRY
109
TAMPA, FL 33618 US

Current Mailing Address:

16006 WEST VIEW CIRCLE
ODESSA, FL 33556

New Mailing Address:

16006 WEST VIEW CIRCLE
ODESSA, FL 33556 US

FEI Number: 59-3420568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOT, GREGORY L CEO
16006 WEST VIEW CIRCLE
ODESSA, FL 33556 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ELLIOT, GREGORY L CEO
Address: 16006 WEST VIEW CIRCLE
City-St-Zip: ODESSA, FL 33556

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTS () Change (X) Addition
Name: ELLIOT, GREGORY L
Address: 16006 WEST VIEW CIRCLE
City-St-Zip: ODESSA, FL 33556 33

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY ELLIOT

CEO

04/28/2008

Electronic Signature of Signing Officer or Director

Date