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Feb 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02557 (7)  
1. Corporation Name  
HYDE ASSOCIATES, INC.



Principal Place of Business: 905 S. BAYSHORE DR., #529 MIAMI FL 33131  
Mailing Address: 905 S. BAYSHORE DR., #529 MIAMI FL 33131-2924

3. Date Incorporated or Qualified: 06/28/1984  
3a. Date of Last Report: 01/24/1996

2. Principal Place of Business: 641 HAMPTON LANE, KEY BISCAIENE, FL 33149  
2a. Mailing Address: PO Box 490034, Key Biscayne, FL 33149  
22. City & State: Key Biscayne, FL  
23. Zip: [blank] Country: [blank]  
24. [blank] 25. [blank] 26. [blank] 27. [blank] 28. [blank] 29. [blank] 30. [blank]

4. FEI Number: 59-2424365  
Applied For: Not Applicable  
5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [x] Yes [ ] No

9. Name and Address of Current Registered Agent  
HYDE, ALVIN S.  
905 SO. BAYSHORE DR., #529  
MIAMI FL 33131

10. Name and Address of New Registered Agent  
81 Name: [blank]  
82 Street Address (P.O. Box Number is Not Acceptable): 641 HAMPTON LANE  
83 [blank]  
84 City: KEY BISCAIENE FL 85 Zip Code: 33149

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  
SIGNATURE: ALVIN S. HYDE  
(NOTE: Registered Agent signature required when re-registering)  
DATE: 2/19/97

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HYDE, ALVIN S	
STREET ADDRESS	905 S BAYSHORE DR 529	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	HYDE, ALVIN S.	
STREET ADDRESS	905 S BAYSHORE DR 529	
CITY-ST-ZIP	MIAMI FL	
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	HYDE, HILLARY A.	
STREET ADDRESS	7552 N. DENVER AVE.	
CITY-ST-ZIP	PORTLAND OR	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	641 HAMPTON LANE
1.4 CITY-ST-ZIP	KEY BISCAIENE, FL 33149
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	641 HAMPTON LANE
2.4 CITY-ST-ZIP	KEY BISCAIENE, FL 33149
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	17475-A BLUE HERON RD.
3.4 CITY-ST-ZIP	LAKE OSWAGO, OR 97034
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ALVIN S. HYDE 2/19/97 305-361-5900  
Date Daytime Phone #

CR2E034 (9/96)