FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000044352 (8)

FILED Mar 17 1998 8:00am Secretary of State

HYDE PARK PLACE SWANN, INC.							
Principal Place	e of Business	Mailing Address			-{		
2608 SWANN AVENUE 1607 COTTAGEWOOD DRIVE							
TAMPA FL 33609 BRANDON FL 33510			•		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	IN THIS SPACE	
					05/17/1996		
2. Principal Pl	ace of Business	2a. Mailing Address		•	4. FEI Number		Applied For
21		26		59-3379159		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Regulred	
City & State		City & State		6 Floation Compaign Financing			
23		28		Election Campaign Financing Trust Fund Contribution		OO May Be ed to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid		
24	25	29 3	0		Personal Property Tax due June 3		□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	latered Agent	
GO	SS, TRENT C.		61	Name			
5028 FISHER STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable	э)	
ZEF	PHYRHILLS FL 33541			·			
			83				
			84	City		FL 85 Z	ip Code
44 Durement I	to the provisions of Sections 607.050	2 and 607 1508. Florida Statutes	the above	e-named corn	oration submits this statement for the pu		a its registered
office or re	egistered agent, or both, in the State	of Florida, Such change was aut	thorized by	the corporati	on's board of directors. I hereby accept	the appointment	as registered
•	m familiar with, and accept the obliga	mons of, section 607.0505, Florid	oa Stalules),			
SIGNATURE	Signature typed or printed name of registered age	nt and title if applicable (NOTE: I	Registered Age	nt signature require	ed when reinstaling)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	0	DELETE 1.1 T				☐ Chang	ge 🔲 Addition
NAME	4000 man .		1.2 NAME				
STREET ADDRESS	***************************************		1.3 STREET		•		
CITY-ST-ZIP	ZEPHYRHILLS FL 33541			T-ZIP		Chang	ge Addition
TITLE NAME	D McDuffie, tracy	Dittil	2.1 TITLE 2.2 NAME			C Ollang	,o Audinon
STREET ADDRESS	1607 COTTAGEWOOD DR			ADDRESS			
CITY-ST-ZIP			2.4 CITY-S				
TITLE			3.1 TITLE	71 211		☐ Chang	ge Addition
NAME	MCDUFFIE, JOHN	321					
STREET ADDRESS	1607 COTTAGEWOOD DR		3.3 STREET	ADDRESS			
CITY - ST - ZIP	BRANDON FL 33510			ST-ZIP			
TITLE		DELETE	4.1 TITLE			Chang	ge 🔲 Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				i
CITY-ST-ZIP		DELETE	4.4 CITY - S	T-ZIP		Chang	pe Addition
TITLE		☐ DELETE	5 1 TITLE				, C Addition
NAME CTOSET ADDRESS			5.2 NAME 5.3 STREET	YDOBECC			
STREET ADDRESS			5.4 CITY-S				
CITY-ST-ZIP TITLE		DELE te	6.1 DTLE	1 - 4.If	· · ·	Chang	ge Addition
NAME		_	6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - Ş				
	artify that the information europlied wi	th this filing does not qualify for	the evern	tion stated in t	Section 119 07(3)(i) Florida Statutes, Lfu	irther certify that	the information

Thereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. 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.