

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000111256

1. Entity Name

HYDE PARK PAPER COMPANY, INC.



Principal Place of Business

4009 HENDERSON BLVD
TAMPA, FL 33629

Mailing Address

P O BOX 320061
TAMPA, FL 33679



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3619853

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

REIBER, JACOB I
26650 STATE ROAD 54
LUTZ, FL 33549

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000121950

04/21/04-80009-016 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME HOFFMAN, PAUL A
STREET ADDRESS 4009 HENDERSON BLVD
CITY-ST-ZIP TAMPA, FL 33629

TITLE D
NAME HOFFMAN, KELLY C
STREET ADDRESS 4009 HENDERSON BLVD
CITY-ST-ZIP TAMPA, FL 33629

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kelly Hoffman Kelly Hoffman 4/19/04 (813) 286-7772