

ARTICLES OF INCORPORATION
OF
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

AUG 13 1990

Corporations Section

I, the undersigned natural person over the age of eighteen (18), acting as an incorporator, adopt the following Articles of Incorporation of Hyde Park Neighborhood Association, Inc. (referred to as the "Corporation") under the Texas Non-Profit Corporation Act (referred to as the "Act"):

ARTICLE 1

NAME

The name of the Corporation is Hyde Park Neighborhood Association, Inc.

ARTICLE 2

NONPROFIT CORPORATION

The Corporation is a nonprofit corporation. Upon dissolution, all of the Corporation's assets shall be distributed to the State of Texas or an organization exempt from taxes under Internal Revenue Code Section 501(c)(3) for one or more purposes that are exempt under the Texas franchise tax. The Corporation shall be the successor to an unincorporated association named Hyde Park Neighborhood Association and located in Austin, Texas.

ARTICLE 3

DURATION

The period of its duration is perpetual.

ARTICLE 4

PURPOSE

The purpose for which the Corporation is organized is to represent the interests of its members, who are residents of the Hyde Park Neighborhood in Austin, Texas.

ARTICLE 5

POWERS

Except as otherwise provided in these Articles, the Corporation shall have all of the powers provided in the Act.

ARTICLE 6

RESTRICTIONS AND REQUIREMENTS

The Corporation shall not pay dividends or other corporation income to its members, directors or officers or otherwise accrue distributable profits or permit the realization of private gain. The Corporation shall have no power to take any action prohibited by the Act.

ARTICLE 7

MEMBERSHIP

The Corporation shall have one class of members.

ARTICLE 8

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation is 4206 Avenue F, Austin, Texas. The name of the initial registered agent at this office is John Sanford.

ARTICLE 9

BOARD OF DIRECTORS

The qualifications, manner of selection, duties, terms and other matters relating to the Board of Directors (referred to as the "Board of Directors") shall be provided in the bylaws. The initial Board of Directors shall consist of five (5) persons. The number of directors may be increased or decreased by adoption or amendment of bylaws. The initial Board of Directors shall consist of the following persons at the following addresses:

Name of Director	Street Address
John Sanford	4206 Avenue F, Austin, Texas
H. Grant Thomas	4106 Avenue F, Austin, Texas
Larry Gilg	3908 Avenue G, Austin, Texas
Ben Heimsath	4110 Speedway, Austin, Texas
James Allman	1408 Winsted, Austin, Texas

ARTICLE 12

CONSTRUCTION

All references in these Articles of Incorporation to statutes, regulations, or other sources of legal authority shall

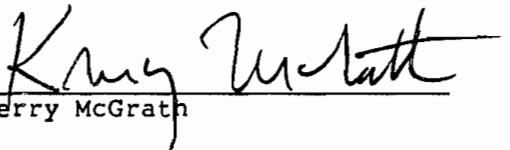
refer to the authorities cited, or their successors, as they may be amended from time to time.

ARTICLE 13

INCORPORATOR

The name and street address of the incorporator is: Kerry McGrath, 4507 Avenue C, Austin, Texas.

I execute these Articles of Incorporation on August 10, 1990.


Kerry McGrath

SECRETARY OF STATE
AUSTIN, TEXAS

DETERMINATION OF FORFEITURE PURSUANT TO SECTION 171.309, TEXAS
TAX CODE ANNOTATED

CAME TO BE CONSIDERED ON THE DATE SHOWN HEREON, FORFEITURE
OF THE CHARTER OR CERTIFICATE OF AUTHORITY OF THE
FOLLOWING CORPORATION; THE SECRETARY OF STATE FINDS AND
DETERMINES THE FOLLOWING:

CORPORATION NAME

HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

CHARTER NO.--TYPE	RTDB FORFEITED	CERTIFICATE/CHARTER FORFEITED
1162813-01	02/11/1992	02/02/1993

THAT THE COMPTROLLER OF PUBLIC ACCOUNTS HAS NOTIFIED THIS
OFFICE THAT SAID CORPORATION HAS FAILED TO FILE A CURRENT
YEAR FRANCHISE TAX REPORT TO ESTABLISH THE EXISTENCE OF
ASSETS FROM WHICH A JUDGEMENT FOR THE FRANCHISE TAXES,
PENALTIES AND COURT COSTS MAY BE SATISFIED.
THAT THE COMPTROLLER OF PUBLIC ACCOUNTS HAS FURTHER STATED
THAT THE SAID CORPORATION HAS FAILED OR REFUSED TO REVIVE
ITS RIGHT TO DO BUSINESS.

IT IS THEREFORE ORDERED THAT THE CHARTER OR CERTIFICATE OF
AUTHORITY OF THE ABOVE NAMED CORPORATION BE AND THE SAME IS
HEREBY FORFEITED WITHOUT JUDICIAL ASCERTAINMENT AND MADE
NULL AND VOID, AND THAT THE PROPER ENTRY BE MADE UPON THE
PERMANENT FILES AND RECORDS OF SUCH CORPORATION TO SHOW
SUCH FORFEITURE AS OF THE DATE HEREOF.

**APPLICATION FOR REINSTATEMENT AND
REQUEST TO SET ASIDE FORFEITURE**

MAY 14 1993

Corporations Section

By: HYDE PARK NEIGHBORHOOD ASSOCIATION INC.

Charter No. 011628138-1 Taxpayer Id. No. 30114153353

WHEREAS, the charter of the above corporation was forfeited on 02-02-93
for:

(check one)

- 1. failure to maintain a registered agent, or
- 2. failure to pay state franchise tax, or
- 3. (other)

WHEREAS, the corporation has corrected the default noted above and has paid all fees, taxes, and penalties due;

NOW THEREFORE, the corporation hereby applies for reinstatement of its corporate charter, and requests that the secretary of state set aside the forfeiture of the corporation.

By: [Signature] [Signature] P
(signature) (title) PRESIDENT

INSTRUCTIONS FOR FILING APPLICATION FOR REINSTATEMENT

- 1. Submit two copies of the application. We will place one document on record and return a file stamped copy to you for your files. Prior to signing, please read the statements on this form carefully. A person commits an offense under the Texas Business Corporation Act, the Texas Limited Liability Company Act or the Texas Non-Profit Corporation Act if the person signs a document the person knows is false in any material respect with the intent that the document be delivered to the secretary of state for filing. The offense is a Class A misdemeanor.
- 2. An application to set aside a forfeiture for failure to pay state franchise tax must be signed by an officer, director or shareholder. All other applications must be signed by an officer or director of the corporation.
- 3. The filing fee for an application for reinstatement under the Texas Tax Code is \$75.00 for business corporations. The filing fee for business corporation reinstatements for non-tax reasons is \$50.00.

Non-Profit corporations are assessed a filing fee of \$25.00 for non-tax reinstatements. No fee is required for non-profit corporations forfeited for tax reasons.



COMPTROLLER OF PUBLIC ACCOUNTS
STATE OF TEXAS
AUSTIN, 78774

05/14/93

Date

**TEXAS SECRETARY OF STATE
CORPORATION SECTION**

HYDE PARK NEIGHBORHOOD ASSOCIATION INC. has paid all Franchise Taxes through December 31, 1992, and is eligible for reinstatement through May 16, 1994, the next Franchise Tax report due date.

Sylvia Ramirez
Employee Name
2H19
463-4865



The State of Texas

Secretary of State

NOV 15, 1995

JOHN SANFORD, REGISTERED AGENT
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
4206 AVENUE F
AUSTIN, TX

RE: HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
CHARTER NO. 1162913-01

DEAR SIR OR MADAM:

NOT MORE THAN ONCE EVERY FOUR YEARS THE SECRETARY OF STATE MAY REQUEST THAT NON PROFIT CORPORATIONS PROVIDE CURRENT INFORMATION REGARDING THEIR REGISTERED AGENT, OFFICERS AND DIRECTORS. ARTICLE 1396-9.01 OF THE TEXAS NON-PROFIT CORPORATION ACT REQUIRES A CORPORATION TO FILE THE REPORT CONTAINING THIS INFORMATION WITHIN THIRTY (30) DAYS OF THE MAILING OF NOTICE BY THE SECRETARY OF STATE TO THE CORPORATION THAT SUCH REPORT IS DUE. THE RECORDS OF THIS OFFICE REFLECT THAT THE ABOVE REFERENCED CORPORATION WAS NOTIFIED CONCERNING THE FILING OF THIS REPORT OVER THIRTY DAYS AGO.

IF YOU HAVE RECENTLY FILED THIS REPORT, PLEASE DISREGARD THIS NOTICE.

HOWEVER, IF YOU HAVE NOT FILED THIS REPORT PLEASE BE ADVISED THAT PURSUANT TO ARTICLE 1396-9.02 OF THE TEXAS NON-PROFIT CORPORATION ACT THE ABOVE REFERENCED CORPORATION'S RIGHT TO CONDUCT AFFAIRS HAS BEEN FORFEITED FOR FAILURE TO FILE THE REPORT AS OF THE DATE OF THIS LETTER.

THE RIGHT TO CONDUCT AFFAIRS MAY BE REVIVED BY SUBMITTING THE ATTACHED FORM TO THIS OFFICE ALONG WITH A FILING FEE OF \$5.00 PLUS \$1.00 LATE FEE.

FAILURE TO FILE THE REPORT WITHIN ONE-HUNDRED-TWENTY (120) DAYS FROM THE DATE OF THIS LETTER WILL RESULT IN THE FORFEITURE OF THE CORPORATION'S CHARTER, PURSUANT TO ARTICLE 1396-9.02E OF THE TEXAS NON-PROFIT CORPORATION ACT.

IF YOU HAVE ANY QUESTIONS CONCERNING THIS REPORT, PLEASE CONTACT THIS OFFICE AT (512) 463-5582.

SINCERELY,

CORPORATIONS SECTION.
STATUTORY FILINGS DIVISION



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Secre

RETURN TO SENDER
FORWARDED
ORDER EX...

JOHN SANFORD, REGISTERED AGENT
HYDE PARK NEIGHBORHOOD ASSOCIATION
4206 AVENUE F
AUSTIN, TX

SECRETARY OF STATE
STATUTORY DOCUMENTS SECTION
AUSTIN, TEXAS 78711

RECEIVED
SECRETARY OF STATE
NOV 20 1995
CORPORATIONS SECTION



RE: HYDE PARK NEIGHBORHOOD ASSOCIATION
CHARTER NO. 1162813-01

DEAR SIR OR MADAM:

NOT MORE THAN ONCE EVERY FOUR MONTHS
REQUEST THAT NON PROFIT CORPORATION
REGARDING THEIR REGISTERED AGENT
1396-9.01 OF THE TEXAS NON-PROFIT
CORPORATION TO FILE THE REPORT
THIRTY (30) DAYS OF THE MAILING
TO THE CORPORATION THAT SUCH
OFFICE REFLECT THAT THE ABOVE
CONCERNING THE FILING OF THIS

78751-3721 02

IF YOU HAVE RECENTLY FILED THIS
NOTICE.

HOWEVER, IF YOU HAVE NOT FILED
PURSUANT TO ARTICLE 1396-9.02
ACT THE ABOVE REFERENCED CORPORATION
BEEN FORFEITED FOR FAILURE TO
THIS LETTER.

THE RIGHT TO CONDUCT AFFAIRS OF THE
ATTACHED FORM TO THIS OFFICE WITH
\$1.00 LATE FEE.

FAILURE TO FILE THE REPORT WITHIN
FROM THE DATE OF THIS LETTER FOR THE
CORPORATION'S CHARTER, PURSUANT TO THE
NON-PROFIT CORPORATION ACT.

IF YOU HAVE ANY QUESTIONS CONTACT
THIS OFFICE AT (512) 463-5582,
S1

RECEIVED
SECRETARY OF STATE
NOV 17 1995
STATUTORY DOCUMENTS SECTION
AUSTIN, TEXAS

Handwritten signature and initials



NOV 1995
AUSTIN TX
0.3



The State of Texas
Secretary of State

MAR 27, 1996

JOHN SANFORD, REGISTERED AGENT
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
4206 AVENUE F
AUSTIN, TX

RE: HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
CHARTER NO. 01162813-01

DEAR SIR OR MADAM:

OUR RECORDS SHOW THAT YOU WERE NOTIFIED THAT THE ABOVE REFERENCED CORPORATION HAD NEGLECTED TO FILE THE REPORT REQUIRED UNDER THE PROVISIONS OF ARTICLE 1396-9.01, TEXAS NON-PROFIT CORPORATION ACT. THE REPORT WAS NOT FILED WITHIN THE TIME PERIOD PRESCRIBED BY LAW, AND CONSEQUENTLY, THE CORPORATION'S RIGHT TO CONDUCT AFFAIRS WAS FORFEITED.

THE 120-DAY PERIOD DURING WHICH THIS DELINQUENCY MAY HAVE BEEN CORRECTED HAS EXPIRED, AND THE CORPORATION HAS BEEN INVOLUNTARILY DISSOLVED BY ORDER OF THE SECRETARY OF STATE. ENCLOSED IS A COPY OF THAT CERTIFICATE OF INVOLUNTARY DISSOLUTION.


ANY CORPORATION INVOLUNTARILY DISSOLVED FOR THIS DELINQUENCY MAY BE REINSTATED AT ANY TIME BY FILING THE REPORT PRESCRIBED BY ARTICLE 1396-9.01, TEXAS NON-PROFIT CORPORATION ACT, TOGETHER WITH A FILING FEE OF \$25.00, AS PRESCRIBED BY ARTICLE 1396-9.02F, TEXAS NON-PROFIT CORPORATION ACT.

SINCERELY,

ENCLOSURE

CORPORATIONS SECTION
STATUTORY FILINGS DIVISION




Antonio O. Garza, Jr., Secretary of State



The State of Texas

Secretary of State INVOLUNTARY DISSOLUTION

CAME ON TO BE CONSIDERED THIS DAY BY THE SECRETARY OF STATE;
INVOLUNTARY DISSOLUTION OF:

HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

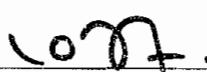
THE SECRETARY OF STATE HEREBY DETERMINES AND FINDS THE FOLLOWING:

1. THAT THE CORPORATION IS REQUIRED TO FILE THE REPORT SPECIFIED IN ARTICLE 1396-9.01, TEXAS NON-PROFIT CORPORATION ACT, AS REQUIRED BY THE SECRETARY OF STATE.
2. THAT THE CORPORATION HAS FAILED TO FILE THE REPORT PRESCRIBED BY LAW WHEN THE SAME HAS BECOME DUE.
3. THAT THE CORPORATION FORFEITED ITS RIGHT TO CONDUCT AFFAIRS IN THIS STATE FOR FAILURE TO FILE SAID REPORT.
4. THAT THE CORPORATION WAS MAILED NOTICE OF SUCH FORFEITURE FOLLOWING A PERIOD OF NOT LESS THAN 30 DAYS NOTICE OF THE REQUIREMENT TO FILE SAID REPORT, AND SIMULTANEOUSLY THEREWITH GIVEN AN ADDITIONAL PERIOD OF NOT LESS THAN 120 DAYS TO CORRECT THIS DELINQUENCY.
5. THAT THE CORPORATION HAS FAILED PRIOR TO SUCH INVOLUNTARY DISSOLUTION TO CORRECT THE NEGLECT, OMISSION OR DELINQUENCY.

IT IS THEREFORE ORDERED THAT THE ABOVE NAMED CORPORATION BE INVOLUNTARILY DISSOLVED WITHOUT JUDICIAL ASCERTAINMENT AND MADE NULL AND VOID PURSUANT TO ARTICLE 9.02E, TEXAS NON-PROFIT CORPORATION ACT.

WITNESS MY HAND AND OFFICIAL SEAL, THIS
TWENTY-SEVENTH DAY OF MARCH, 1996.




Antonio O. Garza, Jr., Secretary of State



Office of the Secretary of State
 Corporations Section
 P.O. Box 13697
 Austin, Texas 78711-3697

FILED
 In the Office of the
 Secretary of State of Texas
 MAR 21 2001
 Corporations Section

ARTICLE 1396-9.01 REPORT

Pursuant to the provisions of article 9.01 of the Texas Non-Profit Corporation Act, the undersigned corporation hereby files its report setting forth:

- The name of the corporation is Hyde Park Neighborhood Association, Inc.
 The file number is 1162813-01
- It is incorporated under the laws of Texas
- The address (including street or building address, city, state, and zip code) of the registered office of the corporation in the state of Texas is
3802 Avenue F, Austin, TX 78751
- The name of its registered agent at such address is Niyanta Spelman
- If the corporation is a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is _____
- The names and respective addresses of its directors and officers are
 (Attach additional sheets if necessary.)

NAME	ADDRESS	OFFICE
<u>Niyanta Spelman</u>	<u>3802 Avenue F, Austin 78751</u>	<u>Co-President</u>
<u>Bob Breeze</u>	<u>4815 Avenue H, Austin 78751</u>	<u>Co-President</u>
<u>Jordan Erdos</u>	<u>4814 Avenue H, Austin 78751</u>	<u>Secretary</u>
<u>Mike Capochiano</u>	<u>4904 Avenue H, Austin 78751</u>	<u>Treasurer</u>

7. The foregoing information is given as of the date of the execution of this report.

Executed on March 21, 2001

Hyde Park Neighborhood Association, Inc.
 Name of Corporation
 By [Signature]
 An Authorized Officer

SECRET

a T Code ■ 13196

**TEXAS FRANCHISE TAX
PUBLIC INFORMATION REPORT**

MUST be filed with your Corporation Franchise Tax Report

Do not write in the space above

c Taxpayer identification number ■ 3-01141-5335-3	d Report year ■ 2001
--	-------------------------

Corporation name and address
HYDE PARK NEIGHBORHOOD ASSOCIATION INC
PO BOX 49427
AUSTIN TX 78765-9427

e PIR/IND ■ <input type="checkbox"/> 1, 2, 3, 4
Secretary of State file number or, if none, Comptroller unchartered number g ■ <input type="checkbox"/>
Item k on Franchise Tax Report form, Page 1 01162813-01 6

The following information MUST be provided for the Secretary of State (S O S) by each corporation or limited liability company that files a Texas Corporation Franchise Tax Report The information will be available for public inspection



"SECTION A" MUST BE COMPLETE AND ACCURATE
If preprinted information is not correct, please type or print the correct information

Please sign below!

Blacken this circle completely if there are currently no changes to the information preprinted in Sections A, B, and C of this report

Corporation's principal office
Principal place of business

SECTION A. Name, title and mailing address of each officer and director Use additional sheets, if necessary

NAME	TITLE	DIRECTOR	Social Security No (Optional)
BREEZE, BOB	P	<input checked="" type="checkbox"/> YES	
MAILING ADDRESS			Expiration date (mm-dd-yyyy)
PO BOX 49427 AUSTIN, TX 78765			
NAME	TITLE	DIRECTOR	Social Security No (Optional)
		<input type="checkbox"/> YES	
MAILING ADDRESS			Expiration date (mm-dd-yyyy)
NAME	TITLE	DIRECTOR	Social Security No (Optional)
		<input type="checkbox"/> YES	
MAILING ADDRESS			Expiration date (mm-dd-yyyy)
NAME	TITLE	DIRECTOR	Social Security No (Optional)
		<input type="checkbox"/> YES	
MAILING ADDRESS			Expiration date (mm-dd-yyyy)
NAME	TITLE	DIRECTOR	Social Security No (Optional)
		<input type="checkbox"/> YES	
MAILING ADDRESS			Expiration date (mm-dd-yyyy)

SECTION B. List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more Enter the information requested for each corporation Use additional sheets, if necessary

Name of owned (subsidiary) corporation	State of incorporation	Texas S O S file number	Percentage Interest
NONE			
Name of owned (subsidiary) corporation	State of incorporation	Texas S O S file number	Percentage Interest

SECTION C. List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company Enter the information requested for each corporation or limited liability company Use additional sheets, if necessary.

Name of owning (parent) corporation	State of incorporation	Texas S O S file number	Percentage Interest
NONE			

Registered agent and registered office currently on file (Changes must be filed separately with the Secretary of State)

Agent JOHN SANFORD
Office 4206 AVENUE F
AUSTIN, TX

Blacken this circle if you need forms to change this information

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this corporation or limited liability company or a related corporation

sign here	Officer, director, or other authorized person	Title Co PRESIDENT	Date 01/14/01	Daytime phone (Area code and number) 512/322-6269
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Do not write in the space above

a. T Code 13196 Franchise 16196 Bank

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT
 MUST be filed to satisfy franchise tax requirements

Corporation name and address

c. Taxpayer identification number 3011415353	d. Report year 2003
---	------------------------

HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
 P.O. Box 49427
 Austin, TX 78765-9427

e. PIR/IND 1, 2, 3, 4

Secretary of State file number or, if none, Comptroller unchartered number
 g. ■

Item k on Franchise Tax Report form, Page 1 01162813016

The following information MUST be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

Please sign below!

If the preprinted information is not correct, please type or print the correct information.
 Blacken this circle completely if there are currently no changes to the information preprinted in Sections A, B, and C of this report.

Corporation's principal office

Principal place of business

SECTION A. Name, title, and mailing address of each officer and director.

NAME GLEN COLEMAN	TITLE PRES	DIRECTOR <input type="checkbox"/> YES	Social Security No. (Optional)
MAILING ADDRESS P.O. Box 49427, Austin, TX 78765-9427			Term expiration (mm-dd-yyyy)
NAME	TITLE	DIRECTOR <input type="checkbox"/> YES	Social Security No. (Optional)
MAILING ADDRESS			Term expiration (mm-dd-yyyy)
NAME	TITLE	DIRECTOR <input type="checkbox"/> YES	Social Security No. (Optional)
MAILING ADDRESS			Term expiration (mm-dd-yyyy)
NAME	TITLE	DIRECTOR <input type="checkbox"/> YES	Social Security No. (Optional)
MAILING ADDRESS			Term expiration (mm-dd-yyyy)
NAME	TITLE	DIRECTOR <input type="checkbox"/> YES	Social Security No. (Optional)
MAILING ADDRESS			Term expiration (mm-dd-yyyy)

SECTION B. List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested for each corporation or limited liability company.

Name of owned (subsidiary) corporation None	State of incorporation	Texas SOS file number	Percentage Interest
Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number	Percentage Interest

SECTION C. List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

Name of owning (parent) corporation None	State of incorporation	Texas SOS file number	Percentage Interest
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Registered agent and registered office currently on file (See instructions if you need to make changes.)

Agent: NIYANTA SPELMAN
 Office: 3802 AVENUE F, AUSTIN, TX 78751

Blacken this circle if you need forms to change this information.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this corporation or limited liability company or a related corporation.

sign here <i>[Signature]</i>	Officer, director, or other authorized person President	Title	Date 11/17/03	Daytime phone (Area code and number)
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a T Code 13196 Franchise 16196 Bank

Texas Franchise Tax Public Information Report

Must be filed to satisfy franchise tax requirements

Corporation name and address
 HYDE PARK NEIGHBORHOOD ASSOCIATION, INC
 P.O. BOX 49427
 AUSTIN, TEXAS 78765-9427

Do not write in the space above

c Taxpayer identification number 30114153353	d Report year 2004
e PIR / IND <input type="checkbox"/>	1, 2, 3, 4
Secretary of State file number or, if none, Comptroller unchartered number	
Item k on Franchise Tax Report form, page 1	g <input type="checkbox"/> <input checked="" type="checkbox"/> 0116281301 6

The following information must be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

If preprinted information is not correct, please type or print the correct information. Please sign below!

Check here if there are currently no changes to the information preprinted in Sections A, B, and C of this report.

Corporation's Principal Office

Principal Place of Business

Section A Name, title and mailing address of each officer and director.

Name JOHN KERR	Title PRES	Director <input type="checkbox"/> Yes	Social Security Number (optional)
Mailing Address P.O. BOX 49427, AUSTIN, TX 78765-9427			Term Expiration (mm-dd-yyyy)
Name	Title	Director <input type="checkbox"/> Yes	Social Security Number (optional)
Mailing Address			Term Expiration (mm-dd-yyyy)
Name	Title	Director <input type="checkbox"/> Yes	Social Security Number (optional)
Mailing Address			Term Expiration (mm-dd-yyyy)
Name	Title	Director <input type="checkbox"/> Yes	Social Security Number (optional)
Mailing Address			Term Expiration (mm-dd-yyyy)
Name	Title	Director <input type="checkbox"/> Yes	Social Security Number (optional)
Mailing Address			Term Expiration (mm-dd-yyyy)

Section B List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested for each corporation or limited liability company.

Name of Owned (subsidiary) Corporation NONE	State of Incorporation	Texas SOS File Number	Percentage Interest
Name of Owned (subsidiary) Corporation	State of Incorporation	Texas SOS File Number	Percentage Interest

Section C List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

Name of Owning (parent) Corporation NONE	State of Incorporation	Texas SOS File Number	Percentage Interest
---	------------------------	-----------------------	---------------------

Registered Agent and Registered Office Currently on File. (See instructions if you need to make changes.)

Agent: NIVANTA SPELMAN
 Office: 3802 ALVAREZ F, AUSTIN, TX 78751

Check here if you need forms to change this information.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this corporation or limited liability company or a related corporation. TXCA9901L 02/26/03

sign here <input checked="" type="checkbox"/>	Officer, Director, or Other Authorized Person John F. Kerr	Title PRESIDENT	Date 11/12/04	Daytime Phone (area code and number) 512-451-3331	IN
---	---	--------------------	------------------	--	----



05-102
(12-05/25)

3333

b. ■

06147340392 0002

a. T Code ■ 13196

This report MUST be filed to satisfy franchise tax requirements

Do not write in the space above

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

c. Taxpayer identification number 3-01141-5335-3	d. Report year 2006
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Corporation name and address

HYDE PARK NEIGHBORHOOD ASSOCIATION INC
PO BOX 49427
AUSTIN TX 78765-9427

e. PIR / IND 1 4

Secretary of State file number or, if none, Comptroller unchartered number

Item k on Franchise Tax Report, Form 05-142 9. ■ 0116281301

Please mark through any incorrect information, and type or print the correct information.

The following information MUST be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

Blacken this circle completely if there are currently no changes to the information preprinted in Section A of this report. Then, complete Sections B and C.



Please sign below!

Officer and director information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers and directors change throughout the year.

Corporation's principal office

Principal place of business

SECTION A. Name, title, and mailing address of each officer and director.

NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
JOHN KERR H. GRANT THOMAS	PRESIDENT	<input checked="" type="checkbox"/> YES	
MAILING ADDRESS: PO BOX 49427 AUSTIN, TX 78765			
NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
		<input type="checkbox"/> YES	
NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
		<input type="checkbox"/> YES	
NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
		<input type="checkbox"/> YES	
NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
		<input type="checkbox"/> YES	

SECTION B. List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested for each corporation or limited liability company.

Name of owned (subsidiary) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest
NONE			
Name of owned (subsidiary) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest

SECTION C. List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

Name of owning (parent) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest
NONE			

Registered agent and registered office currently on file. (See instructions if you need to make changes.)

Agent: NIYANTA SPELMAN
Office: 3802 AVENUE F
AUSTIN, TX 78751

Blacken this circle if you need forms to change this information. Changes can also be made on-line at <http://www.sos.state.tx.us/corp/sosda/index.shtml>

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this, or a related, corporation or limited liability company.

sign here H. Grant Thomas	Officer, director, or other authorized person	Title DIRECTOR	Date 05/14/06	Daytime phone (Area code and number) 512-450-0764
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0524543



Office of the Secretary of State

July 17, 2007

Niyanta Spelman
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
3802 AVENUE F
Austin, TX 78751

Nonprofit Periodic Report – First Notification Letter

Re: HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
File Number: **116281301**

Dear Registered Agent:

A nonprofit corporation is required by law to file a periodic report with the Secretary of State not more than once every four years. You are hereby notified that the above referenced nonprofit corporation is required to file the periodic report at this time. This periodic report should be completed and received by this office on or before **August 16, 2007**. Failure to file the periodic report when due will result, after notice, in the forfeiture of the corporation's right to conduct affairs in the state of Texas and could ultimately result, after notice, in the involuntary dissolution or termination of the domestic corporation or the revocation of the registration of the foreign corporation.

One copy of the required periodic report is enclosed, along with instructions for completing the report. Make any necessary changes to the preprinted information by typing or printing the new information in the area provided. Submit the periodic report, along with the required filing fee that is shown on the attached report, to the mailing address on the report form. **Please make a copy of this report prior to mailing and retain for the corporation's records.**

For your convenience, the periodic report may be filed online through SOSDirect at <http://www.sos.state.tx.us/corp/sosda/index.shtml>.

If you have any questions about filing the periodic report or require assistance filing online using SOSDirect, please call 512-475-2705 or e-mail ReportsUnit@sos.state.tx.us.

Sincerely,
Reports Unit
Business and Public Filings Division

Enclosure



Office of the Secretary of State

PERIODIC REPORT - NONPROFIT CORPORATION

File Number: 116281301
Filing Fee: \$5 + 9.00

Page 1 of 2

1. The corporation name is:
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.
2. It is incorporated under the laws of: *(set forth state or foreign country)*
Texas

FILED in the Office of the
Secretary of State of Texas

DEC 14 2007

Corporations Section

3. The name of the registered agent is:

~~Niyanta Spelman~~
(Make changes here)

I. JAY AARONS

4. The registered office address, which is identical to the business office address of the registered agent in Texas, is.

~~3802 AVENUE F~~
Austin, TX 78751

~~410 AVENUE G~~ **3215 STECK AVE, STE 101**
78757

(Make changes here-use street or building address, see Instructions)

5. If the corporation is a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is:

(Make changes here-use street or building address; see Instructions).

6. The names and addresses of all directors of the corporation are: (A Texas corporation must have at least 3 directors.)

(If additional space is needed, include the information as an attachment to this form for item 6)

Name

Address

City/ State/Zip

H GRANT THOMAS

PO BOX 49427

AUSTIN, TX 78765

LAWRENCE GILB

P.O. Box 49427

AUSTIN, TX 78765

NIYANTA SPELMAN

P.O. Box 49427

AUSTIN, TX 78765

7. The names, addresses, and titles of all officers of the corporation are: (A Texas corporation must include a president and a secretary and the same person cannot hold both offices).

(If additional space is needed, include the information as an attachment to this form for item 7.)

<u>Name</u>	<u>Address</u>	<u>City/State/Zip</u>	<u>Title</u>
LAWRENCE GILG	P.O. Box 49427	AUSTIN, TX 78765	Pres.
H. GRANT THOMAS	P.O. Box 49427	AUSTIN, TX 78765	Sec.

Execution:

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: 11-09-2007

Lawrence Gilg
Signature of authorized officer

a. T Code ■ 13196

This report MUST be filed to satisfy franchise tax requirements

Do not write in the space above

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

c. Taxpayer identification number 3-01141-5335-3	d. Report year 2007
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Corporation name and address
 HYDE PARK NEIGHBORHOOD ASSOCIATION INC
 4287 AVENUE F
 AUSTIN TX 78751-3720
 P.O. BOX 49427
 AUSTIN, TX. 78765

e. PIR / IND 1 4
 Secretary of State file number or, if none, Comptroller unchartered number
 Item k on Franchise Tax Report, Form 05-142 9. 0116281301

Please mark through any incorrect information, and type or print the correct information.

The following information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Corporation Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.



Blacken this circle completely if there are currently no changes to the information preprinted in Section A of this report. Then, complete Sections B and C.

Please sign below! Officer and director information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers and directors change throughout the year.

Corporation's principal office
 Principal place of business

SECTION A. Name, title, and mailing address of each officer and director.

NAME	TITLE	DIRECTOR	Term expiration (mm-dd-yyyy)
H GRANT THOMAS	DIRECTOR	<input checked="" type="checkbox"/> YES	
MAILING ADDRESS: PO BOX 49427 AUSTIN, TX 78765			
LAWRENCE GILG	Director	<input checked="" type="checkbox"/> YES	
MAILING ADDRESS: P.O. BOX 49427, AUSTIN, TX 78765			
		<input type="checkbox"/> YES	
		<input type="checkbox"/> YES	
		<input type="checkbox"/> YES	

SECTION B. List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested for each corporation or limited liability company.

Name of owned (subsidiary) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest
NONE			

SECTION C. List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

Name of owning (parent) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest
NONE			

Registered agent and registered office currently on file. (See instructions if you need to make changes.)
 Agent: NIYANTA SPELMAN
 Office: 3802 AVENUE F
 AUSTIN, TX 78751

Blacken this circle if you need forms to change the registered agent or registered office information.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this, or a related, corporation or limited liability company.

sign here	Officer, director, or other authorized person Lawrence Gilg	Title Director	Date 11-9-2007	Daytime phone (Area code and number) 512-452-0077
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05-102
(Rev. 1-08/28)
Tcode 13196

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

(To be filed by Corporations and Limited Liability Companies (LLCS))
This report **MUST** be filed to satisfy franchise tax requirements

■ Taxpayer number **30114153353** ■ Report year **2008**

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name **HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.**

Mailing address **P.O. Box 49477**

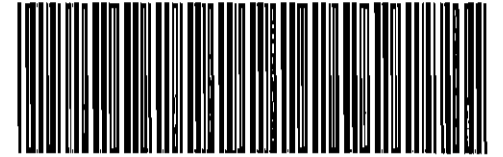
City **HUSTON** State **TX** ZIP Code **78765** Plus 4

Secretary of State file number or Comptroller file number

0116281301

○ Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. Then complete Sections B and C.

Entity's principal office
Principal place of business



100000000008

Please sign below!

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.

SECTION A Name, title and mailing address of each officer, director or member.

Name	Title	Director	Term expiration	State	ZIP code
LAWRENCE GILG		<input checked="" type="radio"/> YES	m m d d y y	TX	78765
Mailing address P.O. Box 49477	City AUSTON				
H. GRANT THOMAS		<input checked="" type="radio"/> YES	m m d d y y	TX	78765
Mailing address P.O. Box 49477	City AUSTON				
NIYANTA SPELMAN		<input checked="" type="radio"/> YES	m m d d y y	TX	78765
Mailing address P.O. Box 49477	City AUSTON				
P.O. Box 49477		<input type="radio"/> YES	m m d d y y		

SECTION B Enter the information required for each corporation or LLC, if any, in which this reporting entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
NONE			

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this reporting entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
NONE			

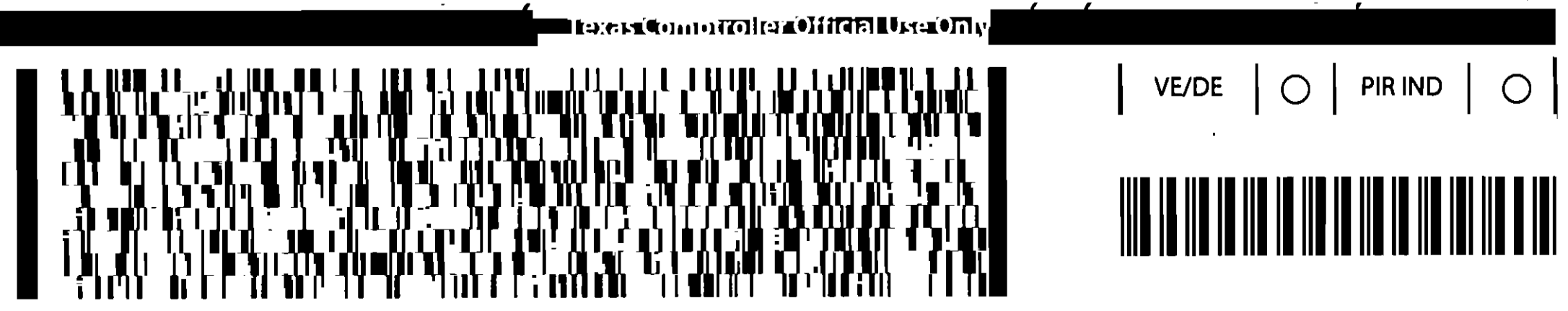
Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: **I-SAY AARONS** Office: **3215 STOCK AVENUE STE. 101** City **AUSTON** State **TX** ZIP Code **78757**

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here **Lawrence Gilg** Title **Director** Date **11/11/08** Area code and phone number **(512) 457-2800**



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TX2009 05-102
VER. 1.3 (Rev. 1-08/28)
Tcode 13196

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

(To be filed by Corporations or Limited Liability Companies (LLCS))
This report MUST be filed to satisfy franchise tax requirements

Taxpayer number 30114153353
Report year 2009

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

Mailing address
P.O. BOX 49477

City
AUSTIN

State
TX

ZIP Code
78765

Plus 4
9477

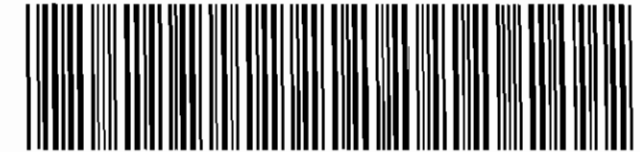
Secretary of State file number
or Comptroller file number

0116281301

[X] Check box if there are currently no changes or additions to the information displayed in Section A of this report. Then complete Sections B and C.

Entity's principal office
P.O. BOX 49477, AUSTIN, TX 78765-9477
Principal place of business
P.O. BOX 49477, AUSTIN, TX 78765-9477

Please sign below! Officer, director, and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3011415335309

SECTION A. Name, title, and mailing address of each officer, director, or member.

Table with 4 columns: Name, Title, Director (Yes/No), Term expiration (m m d d y y). Rows include H. GRANT THOMAS, LAWRENCE GILG, and NIYANTA SPELMAN.

SECTION B. Enter the information required for each corporation or LLC, if any, in which this reporting entity owns an interest of ten percent (10%) or more.

Table with 4 columns: Name of owned (subsidiary) corporation or limited liability company, State of formation, Texas SOS file number, if any, Percentage of Ownership. Row 1: NONE.

SECTION C. Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this reporting entity.

Table with 4 columns: Name of owning (parent) corporation or limited liability company, State of formation, Texas SOS file number, if any, Percentage Ownership. Row 1: NONE.

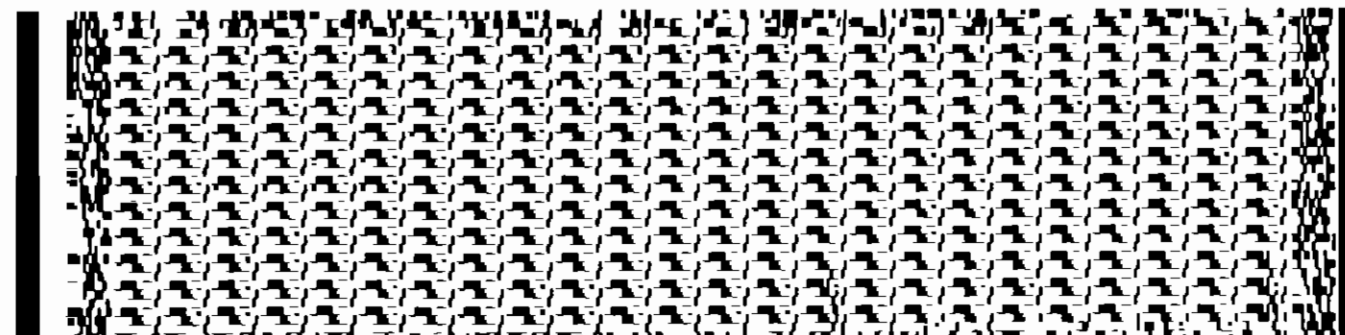
Registered agent and registered office currently on file. (See instructions if you need to make changes.)
Agent: I. JAY AARONS
Office: 3215 STECK AVENUE, STE. 101, AUSTIN, TX 78757

The above information is required by Section 171.203 of Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here [Signature] Title DIRECTOR Date Nov. 9, 2009 Area code and phone number 512-457-2800

Texas Comptroller Official Use Only



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TX2010
VER. 1.0 05-102
(9-09/29)

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

To be filed by Corporations, Limited Liability Companies (LLCS) and Financial Institutions

This report **MUST** be signed and filed to satisfy franchise tax requirements

■ Tcode 13196

■ Taxpayer number

30114153353

■ Report year

2010

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name
HYDE PARK NEIGHBORHOOD ASSOCIATION, INC.

Mailing address
P.O. BOX 49477

City
AUSTIN

State
TX

ZIP Code
78765

Plus 4
9477

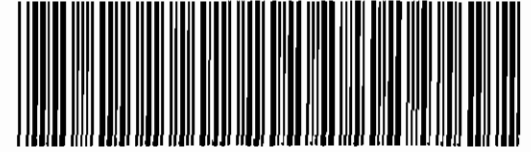
Secretary of State file number or
Comptroller file number

0116281301

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office
P.O. BOX 49477, AUSTIN, TX 78765-9477

Principal place of business
P.O. BOX 49477, AUSTIN, TX 78765-9477



3011415335310

Please sign below! Officer, director, and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.

SECTION A Name, title and mailing address of each officer, director or member.

Name	Title	Director	Term expiration	State	ZIP Code
H. GRANT THOMAS		<input checked="" type="checkbox"/> Yes	m m d d y y	TX	78765
Mailing address	City				
P.O. BOX 49427	AUSTIN				
Name	Title	Director	Term expiration	State	ZIP Code
LAWRENCE GILG		<input checked="" type="checkbox"/> Yes	m m d d y y	TX	78765
Mailing address	City				
P.O. BOX 49427	AUSTIN				
Name	Title	Director	Term expiration	State	ZIP Code
NIYANTA SPELMAN		<input type="checkbox"/> Yes	m m d d y y	TX	78765
Mailing address	City				
P.O. BOX 49477	AUSTIN				

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership

Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: I. JAY AARONS

Check box if you need forms to change the registered agent or registered office information.

Office: 3215 STECK AVENUE, STE. 101

City
AUSTIN

State
TX

ZIP Code
78757

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Title DIRECTOR Date 05/14/10 Area code and phone number 512-461-2800

Texas Comptroller Official Use Only

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