

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State
 03-06-2000 90044 017 ****61.25

DOCUMENT # **761255** ✓
 1. Entity Name
WEST HERNANDO REPUBLICAN CLUB

Principal Place of Business Mailing Address
C/O JEFFREY JOHNSTON
8169 TRANQUIL DR.
SPRING HILL FL. 34606

2. Principal Place of Business 3. Mailing Address
TERRY HAMMOND **TERRY HAMMOND**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
3203 GULFVIEW **3203 GULFVIEW**
 City & State City & State
HERNANDO BEACH, FL. **HERNANDO BEACH, FL.**
 Zip Country Zip Country
34607 **HERNANDO** **34607** **HERNANDO**

A0027334

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
JONATHAN D. SMITH - ESQ.
4410 COMMERCIAL WAY
SUITE 7
SPRING HILL, FL. 34606

4. FEI Number Applied For
59-250-1142 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-JERRY THEIEN <input checked="" type="checkbox"/> Delete 1201 TRYON CR. SPRING HILL, FL. 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P-DORIS OLSZEWSKI <input type="checkbox"/> Delete 9122. DU PONT AVE. SPRING HILL, FL. 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-RICHARD L. POORE <input type="checkbox"/> Delete 13161 BRECHNER ST. SPRING HILL, FL. 34609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-PHYLLIS J. BASHAW <input checked="" type="checkbox"/> Delete 7716 PINE HURST DR. SPRING HILL, FL. 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-FRANCIS COLLETTI <input type="checkbox"/> Delete 1418 VALIANT AVE. SPRING HILL, FL. 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-TERRY HAMMOND <input type="checkbox"/> Delete 3203 GULFVIEW HERNANDO BEACH, FL. 34607

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-P-TERRY HAMMOND <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3203 GULFVIEW HERNANDO BEACH, FL. 34607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-TERRY LYON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9146 FONTAINE DR. BROOKSVILLE, FL. 34613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 617, 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: **Richard L. Poore, PRES.** FEB. 28, 2000 1-352-686-4014

CR2E037 (9/99)