2006 NOT-FOR-PROFIT CORPORATION

FILED

ANNUAL REPURI (AR)					Sep 01, 2006 8:00 am			
DOCUMENT # 761255 1. Entity Name					Secretary of State			
WEST HERNANDO REPUBLICAN CLUB, INC.					09-01-2006 900	001 007 ****61.25	5	
Principal Plac	ce of Business	Mailing Address						
PAUL H. S	WILLIVAN Rich MCDERMOTT	PAUL H. SULLIVAN	Rich MODER	MS T	7 —1			
SPRING HI	PEMYRTLE DR 1092 River 10	SPRING HILL FL 3460	DR 7-92-7	werkow				
US ///	WILLIVAN RICH MCDERMOTO PEMYRTLE DR 1092 River 10 144 MERCED ES ST 1344 Place of Business SPRING HAT FOR	9- US	SPRING Hill	edes 51 Ela 546	09			
2. Principal F	Place of Business SPRING HIM, 64	3. Mailing Address	,					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			2nd MOORE	CR2E037 (4/06)		
City & Sta	ate	City & State		4.	FEI Number 59-250114	^ 	oplied For lot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	S8.75 Ad Fee Require		
	6. Name and Address of Current F	Registered Agent		7.	Name and Address of New F	legistered Agent		
SMITH, JONATHAN D. ESQ			Name					
	10 COMMERCIAL WAY, STE.		Street A	Street Address (P.O. Box Number is Not Acceptable)				
SP	RING HILL FL 34606							
			City			FL Zip Coo	de	
8. The above	e named entity submits this statement for th	ne purpose of changing its re	gistered office or rec	istered agent	, or both, in the State of Florida.	I am familiar with, and a	accept the	
obligations	s of registered agent.							
2,0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
SIGNATURE	Signature, typod or printed name of registered agent and	title if applicable. (NOTE	E: Registered Agent signatur	o required when re	matating)	DATE		
RESELVE V	San San Market Control					ROLLING CORRECT NOT	Mer I was	
	FILE NOW FEE IS \$61.25. Due By September 6, 2006	9. Election Carr Trust Fund C	npaign Financing Contribution.			ke Check Payable da Department of		
10.	OFFICERS AND DIRE	CTORS	11,	ADD	ITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN	<u> </u>	
TILE	PD L	Delete	TITLE					
NAME STREET ADDRESS	SULLIVAN, PAUL H 3444 CRAPE MYRTLE DR		NAME	me D	PERMOTT RICH	- much m	madeca	
CITY-ST-ZIP	HERNANDO BCH FL 34607		STREET ADDRESS CITY-ST-ZIP	7 0%	RING Hill, FlA.	3d - 11144 1111 3th - 2	nceues s	
TITLE (A.)	VD	Delete	TITLE	1/N	•	34604 [V] Change	Addition	
NAME	MCDERMOTT, RICH		NAME	Joh	n R. Mitten	_ ,	Addition	
STREET ADDRESS	7092 RIVER RUN BLVD /// 44		STREET ADDRESS	24	043 TWISTERL	el_		
CITY, ST-7IP	SPRING HILL FL 34607 3 4609	·	CITY-ST-ZIP	B_{n}	043 TWISTERL DOKSUINE FIA 3	14602		
NAME -	RELKO, DORIS	Delete	TITLE	•		☐ Change	☐ Addition	
STREET ADDRESS		. :	NAME STREET ADDRESS					
CITY-ST-ZIP	SPRING HILL FL 34609	*	CITY-ST-ZIP					
TITLE	TD	Delete	TITLE	TO		Change	Addition	
NAME	KINGETER, BILL		NAME	WOOL	John H			
STREET ADDRESS	7377 BOTANICAL DR		STREET ADDRESS	412	7 CAStle HOC			
CITY-ST-ZIP	SPRING HILL FL 34607		CITY-ST-ZIP	<u></u> Sρ	John H 7 CASTIE ACC VING HILL, FLA 3	14609		
TITLE NAME	D BALDWIN, JANEY	☐ Delete	TITLE		•	Change	Addition	
NAME STREET ADDRESS	6113 IVY HILL LANE		NAME STREET ADDRESS					
CITY-ST-ZIP	BROOKSVILLE FL 34602		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE			☐ Change	Addition	
NAME	JOHNSTON, JEFFREY		NAME					
STREET ADDRESS	2162 LINWOOD AVE		STREET ADDRESS					
CITY-ST-ZIP	SPRING HILL FL 34608		CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

CITY-ST-ZIP

SIGNATURE: AMDOL Richard Mc Dermott

Mug. 8,06

352-585-0895