## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 761255** 

Entity Name: FIRST HERNANDO REPUBLICAN CLUB INC

**Current Principal Place of Business:** 

8096 TRANQUIL DRIVE SPRING HILL, FL 34606

**Current Mailing Address:** 

8096 TRANQUIL DRIVE SPRING HILL, FL 34606 US

FEI Number: 59-2501142 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLOCCO, JOHN 6119 DELTONA BLVD SPRING HILL, FL 34606 US

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: JOHN ALLOCCO 03/26/2020

Electronic Signature of Registered Agent

Date

**FILED** Mar 26, 2020

**Secretary of State** 

7701166993CC

Officer/Director Detail:

Title Title DIRECTOR

WITHERELL, ELIZABETH VANDERLEELIE, EDWARD Name Name 8170 MACKINAW ROAD Address 5162 JENSON AVE Address City-State-Zip: WEEKI WACHEE FL 34613 SPRINGHILL FL 34608 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name WOOD, JACK FRIMERE, RONALD Name

Address 4127 CASTLE AVENUE Address 14249 CASCORA COURT SPRING HILL FL 34609 City-State-Zip: SPRING HILL FL 34609 City-State-Zip:

Title DIRECTOR Title **DIRECTOR** Name RUGE, BONNIE RUGE, RONALD A Name

Address 5010 BREAKWATER BLVD Address 5010 BREAKWATER BLVD City-State-Zip: SPRING HILL FL 34607

SPRING HILL FL 34607 City-State-Zip:

Title DIRECTOR Title **PRESIDENT** 

CAMPBELL, JERRY Name FOSTER, ROSEMARY Name 13700 RUDI LOOP Address 8096 TRANQUILL DRIVE Address

City-State-Zip: SPRING HILL FL 34609 SPRING HILL FL 34606 City-State-Zip:

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

03/26/2020 SIGNATURE: ROSEMARY E FOSTER **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title TREASURER Title SECRETARY

Name DOUCET, SUE Name HOLCOMB, STACEY

Address 1415 MAXIMILIAN AVE Address 422 NESSLER WAY

City-State-Zip: SPRING HILL FL 34609 City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR

Name DOUCET, PHIL

Address 1415 MAXIMILIAN AVENUE

City-State-Zip: SPRING HILL FL 34609