

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761255

**Entity Name:** FIRST HERNANDO REPUBLICAN CLUB INC**Current Principal Place of Business:**9535 SOUTHERN BELLE DRIVE  
WEEKI WACHEE, FL 34613**Current Mailing Address:**14139 BASSINGTHORPE DRIVE  
SPRING HILL, FL 34609 US**FEI Number:** 59-2501142**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INGOGLIA, BLAISE  
11181 RIDDLE ROAD  
SPRING HILL, FL 34609 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            CAQUELIN, DONALD D  
Address        14139 BASSINGTHORPE DRIVE  
City-State-Zip: SPRING HILL FL 34609

Title            SECRETARY  
Name            WITHERELL, ELIZABETH  
Address        5162 JENSON AVE  
City-State-Zip: SPRINGHILL FL 34608

Title            DIRECTOR  
Name            INGOGLIA, ANDREW  
Address        11323 HIGHLANDER COURT  
City-State-Zip: SPRING HILL FL 34609

Title            DIRECTOR  
Name            RUGE, RONALD A  
Address        5010 BREAKWATER BLVD  
City-State-Zip: SPRING HILL FL 34607

Title            PRESIDENT  
Name            VICKERS, MARY KAE  
Address        9535 SOUTHERN BELLE DRIVE  
City-State-Zip: WEEKI WACHEE FL 34613

Title            DIRECTOR  
Name            INGOGLA, JULIE  
Address        12494 FEATHER STREET  
City-State-Zip: SPRING HILL FL 34609

Title            DIRECTOR  
Name            WOOD, JACK  
Address        4127 CASTLE AVENUE  
City-State-Zip: SPRING HILL FL 34609

Title            DIRECTOR  
Name            RUGE, BONNIE  
Address        5010 BREAKWATER BLVD  
City-State-Zip: SPRING HILL FL 34607

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*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.*

**SIGNATURE: DONALD D. CAQUELIN****TREASURER****02/04/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                    VP  
Name                    FOSTER, ROSIE  
Address                8096 TRANQUILL DRIVE  
City-State-Zip:    SPRING HILL FL 34606

Title                    DIRECTOR  
Name                    BREMNER, JOSHA  
Address                9141 NORTCLIFFE BLVD  
City-State-Zip:    SPRING HILL FL 34606