

2017 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:**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

03/01/2017

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

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

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

Title DIRECTOR
Name INGOGLIA, ANDREW
Address 11323 HIGHLANDER COURT
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, RONALD A
Address 5010 BREAKWATER BLVD
City-State-Zip: SPRING HILL FL 34607

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 CAQUELIN

TREASURER

03/01/2017

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 DOUCET, SUE
Address 1415 MAXIMILIAN AVE
City-State-Zip: SPRING HILL FL 34609

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