

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761255

Entity Name: FIRST HERNANDO REPUBLICAN CLUB INC**Current Principal Place of Business:**1415 MAXIMILIAN AVENUE
SPRING HILL, FL 34609**Current Mailing Address:**1415 MAXIMILIAN AVENUE
SPRING HILL, FL 34609 US**FEI Number:** 59-2501142**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOUCET, PHILIP RUSSELL
1415 MAXIMILIAN AVENUE
SPRING HILL, FL 34609-6063 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:** PHILIP R DOUCET

02/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name VANDERLEELIE, EDWARD
Address 8170 MACKINAW ROAD
City-State-Zip: WEEKI WACHEE FL 34613

Title VP
Name CAMPBELL, JERRY
Address 13700 RUDI LOOP
City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR
Name DOUCET, SUSAN
Address 1415 MAXIMILIAN AVE
City-State-Zip: SPRING HILL FL 34609

Title PRESIDENT
Name DOUCET, PHILIP
Address 1415 MAXIMILIAN AVENUE
City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR
Name VANCE, FRANCINE
Address 10073 AIRY OAKS COURT
City-State-Zip: WEEKI WACHEE FL 34613

Title DIRECTOR
Name GALBO, JEANNIE
Address 10184 HERNANDO RIDGE ROAD
City-State-Zip: WEEKI WACHEE FL 34613

Title SECRETARY
Name BARLOW, NICOLA
Address 4643 AYRSHIRE DRIVE
City-State-Zip: SPRING HILL FL 34609

Title TREASURER
Name EVANS, MELODY
Address 5468 MOONGATE ROAD
City-State-Zip: SPRING HILL FL 34606

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.

SIGNATURE: PHILIP R DOUCET

PRESIDENT

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCDONALD, SUSAN
Address 12279 FILLMORE STREET
City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR
Name CARROLL, JOHN
Address 1249 WATERFALL DRIVE
City-State-Zip: SPRING HILL FL 34608

Title DIRECTOR
Name GOBLE, PATRICIA
Address 11237 FLOWER AVENUE
City-State-Zip: BROOKSVILLE FL 34613