

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001663

Entity Name: HHS ROWING CLUB, INC.**Current Principal Place of Business:**402 W LAUREL STREET
TAMPA, FL 33602**Current Mailing Address:**PO BOX 360302
TAMPA, FL 33673**FEI Number:** 59-3634945**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPRAGUE, JACQUELIN M
14707 LAKE MAGDALENE CIRCLE
TAMPA, FL 33613 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:** JACQUELIN M SPRAGUE

01/04/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name SPRAGUE, JACQUELIN M
Address 14707 LAKE MAGDALENE CIRCLE
City-State-Zip: TAMPA FL 33613

Title CORRESPONDING SECRETARY
Name DAVIES, LESLEY
Address 10612 ECHO LAKE DR
City-State-Zip: ODESSA FL 33556

Title VP
Name SETTIMI, TELLIE
Address 777 N ASHLEY DR.
 UNIT 3203
City-State-Zip: TAMPA FL 33602

Title PRESIDENT
Name LUECHT, JILL M
Address 8521 NORTHTON GROVES BLVD
City-State-Zip: ODESSA FL 33556

Title RECORDING SECRETARY
Name HAMMER, CATHERINE
Address P.O. BOX 360302
City-State-Zip: TAMPA FL 33673

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: JILL LUECHT**PRESIDENT**

01/04/2022

Electronic Signature of Signing Officer/Director Detail

Date