

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001663

Entity Name: HHS ROWING CLUB, INC.**Current Principal Place of Business:**1111 NORTH BOULEVARD
TAMPA, FL 33605**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:**ANDERSON, KERRY
18230 CYPRESS COVE RD
TAMPA, FL 33549 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	PD
Name	ANDERSON, KERRY
Address	18230 CYPRESS COVE RD
City-State-Zip:	TAMPA FL 33549

Title	VD
Name	YENT, KANDRA
Address	12550 ST CHARLOTTE DR
City-State-Zip:	TAMPA FL 33618

Title	TREASURER
Name	HENNESSY, MICHAEL K
Address	5501 N BRANCH AVENUE
City-State-Zip:	TAMPA FL 33604

Title	VD
Name	YENT, CHARLES
Address	12550 ST CHARLOTTE DR
City-State-Zip:	TAMPA FL 33618

Title	VD
Name	ROBERTS, SUZANNE
Address	PO 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: MICHAEL K HENNESSY**TREASURER****01/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date