

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36439

Entity Name: HERNANDO COUNTY 1013 INC.

Current Principal Place of Business:

1229 VAN DALE AVE
PH
SPRINGHILL, FL 34608

FILED
Jan 17, 2020
Secretary of State
6444176450CC

Current Mailing Address:

1229 VAN DALE AVE
PH
SPRINGHILL, FL 34608 US

FEI Number: 59-2991067

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTALI, JOSEPH RSR.
1229 VAN DALE AVE
SPRING HILL, FL 34608 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 PRESIDENT
Name BABCOCK, ARTHUR
Address 13310 LAWRENCE STREET
City-State-Zip: SPRING HILL FL 34608

Title TRES
Name MONTALI, JOSEPH R
Address 1229 VANDALE AVE
City-State-Zip: SPRING HILL FL 34608

Title VICE PRES.
Name PERRETTO, JIM
Address 9289 PENELOPE DRIVE
City-State-Zip: BROOKSVILLE FL 34613

Title SGT
Name DIPIANO, JOSEPH J
Address 276 SILAS COURT
City-State-Zip: SPRING HILL FL 34609

Title DIR
Name O'NEIL, JAMES
Address 312BORIANA DR
City-State-Zip: HUDSON FL 34613

Title DIRECTOR
Name WRIGHT, EDWARD SR.
Address 2286 PRINCE CHARLES COURT
City-State-Zip: SPRING HILL FL 34606

Title SECRETARY
Name BYRNES, JOHN
Address 3386 KILL DEER PLACE
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name DUNBAR, EDWARD
Address 15016 MIDDLE FAIRWAY DRIVE
City-State-Zip: BROOKSVILLE FL 34609

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: JOSEPH R. MONTALI

TREASURER

01/17/2020

Electronic Signature of Signing Officer/Director Detail

Date