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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **761255**

1. Corporation Name
WEST HERNANDO REPUBLICAN CLUB, INC.

Principal Place of Business	Mailing Address
C/O JEFFREY M JOHNSTON 2162 LINWOOD AVE SPRINGHILL FL 34606 US	C/O JEFFREY M JOHNSTON 2162 LINWOOD AVE SPRINGHILL FL 34606 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 % JERRY THEILEN	26 % JERRY THEILEN	12/29/1981
Suite, Apt. #, etc. 22 8169 TRANQUIL DR.	Suite, Apt. #, etc. 27 8169 TRANQUIL DR	4. FEI Number 59-2501142 ☐ Applied For ☐ Not Applicable
City & State 23 SPRING HILL, FL.	City & State 28 SPRING HILL, FL.	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 34606 Country 25 US	Zip 29 34606 Country 30 US	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SMITH, JONATHAN D. ESQ. 4410 COMMERCIAL WAY, STE. 7 SPRING HILL FL 34606	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	COLLETTI, FRANCIS		1.2 NAME		
STREET ADDRESS	1418 VALIANT AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL, FL 00000		1.4 CITY-ST-ZIP		
TITLE	PD	■ DELETE	2.1 TITLE	PD	■ Change ☐ Addition
NAME	JOHNSTON, JEFFREY M		2.2 NAME	JERRY THEILEN	
STREET ADDRESS	2162 LINWOOD AVE		2.3 STREET ADDRESS	8169 TRANQUIL DR.	
CITY-ST-ZIP	SPRING HILL, FL 00000		2.4 CITY-ST-ZIP	SPRING HILL, FL. 34606	
TITLE	VD	■ DELETE	3.1 TITLE	VD	■ Change ☐ Addition
NAME	PADDEN, BEATRICE		3.2 NAME	DORIS OLSZEWSKI	
STREET ADDRESS	14389 DEHAVEN AVENUE		3.3 STREET ADDRESS	9122 DUPONT AVE.	
CITY-ST-ZIP	BROOKSVILLE FL		3.4 CITY-ST-ZIP	SPRING HILL, FL. 34608	
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	POORE, RICHARD L.		4. 2 NAME		
STREET ADDRESS	13161 BRECHNER ST.		4.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL		4.4 CITY-ST-ZIP		
TITLE	D	■ DELETE	5.1 TITLE	D	■ Change ☐ Addition
NAME	HAMMOND, TERRY		5.2 NAME	JOE FORTIS	
STREET ADDRESS	3203 GULFVIEW DR		5.3 STREET ADDRESS	3162 GLENBROOK AVE.	
CITY-ST-ZIP	SPRING HILL FL		5.4 CITY-ST-ZIP	SPRING HILL, FL. 34608	
TITLE	S	■ DELETE	6.1 TITLE	S	■ Change ☐ Addition
NAME	PATRICIA BAKER		6.2 NAME	PHYLLIS J. BASHAW	
STREET ADDRESS	8267 DELAWARE ST		6.3 STREET ADDRESS	7716 PINEHURST DR.	
CITY-ST-ZIP	SPRING HILL FL		6.4 CITY-ST-ZIP	SPRING HILL, FL. 34606	

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L. Poore JAN. 15, 1999 352-686-4014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #