

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761768

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: WEST PASCO REPUBLICAN CLUB, INC.

**Current Principal Place of Business:**

12609 FOURTH ISLE  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

12609 FOURTH ISLE  
HUDSON, FL 34667

**New Mailing Address:**

FEI Number: 59-2414722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUCAS, JEFF  
11922 TEE TIME CIR  
NEW PORT RICHEY, FL 34654 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SPROWLS, CHRIS  
Address: 11922 TEE TIME CIR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: EV (X) Delete  
Name: COLLINS, ED  
Address: 5320 LITTLE RD # 117  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD ( ) Delete  
Name: MCALARNEY, HENRY P  
Address: 12609 FOURTH ISLE  
City-St-Zip: HUDSON, FL 34667

Title: 1V (X) Delete  
Name: EHRLICH, GEORGE  
Address: 43646 CHESWICK DR 703  
City-St-Zip: HOLIDAY, FL 34891

Title: 2V ( ) Delete  
Name: FOSTER, SHAWN  
Address: 8217 MASSACHUSETTS AVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: S ( ) Delete  
Name: LUDAKER, RUTH  
Address: 3646 CHESNICK DR  
City-St-Zip: HOLIDAY, FL 34691

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: MCALARNEY, HENRY P  
Address: 12609 FOURTH ISLE  
City-St-Zip: HUDSON, FL 34667

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: FOSTER, SHAWN  
Address: 8217 MASSACHUSETTS AVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: S (X) Change ( ) Addition  
Name: FALZONE, ROBIN  
Address: 1253 FALLOWFIELD DRIVE  
City-St-Zip: TRINITY, FL 34655 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J. SPROWLS

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date