

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N08624

1. Entity Name

HERNANDO SHRINE CLUB HOLDING CORPORATION

Principal Place of Business

13400 MONTGOUR ST
BROOKSVILLE FL 34613
US

Mailing Address

13400 MONTGOUR ST
BROOKSVILLE FL 34613-6804
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2248664

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSTON, JOSEPH E JR
29 S BROOKSVILLE AVE
BROOKSVILLE FL 34601

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ PRESIDENT ☐ Delete
NAME OLSON, WILLIAM
STREET ADDRESS 6494 PINE MEADOW DR
CITY-ST-ZIP SPRING HILL FL 34606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP
STREET ADDRESS WEAVER, RICHARD A
CITY-ST-ZIP 3289 GRAYTON DR.
SPRING HILL FL 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS MORGAN, WILLIAM A JR
CITY-ST-ZIP 3917 BUTLER BLVD.
BROOKSVILLE FL 34613

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME T
STREET ADDRESS BASEHORE, FRED E
CITY-ST-ZIP 9399 BURNAM DR.
BROOKSVILLE FL 34613

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS TOWNSEND, ROBERT L
CITY-ST-ZIP 15131 BRICE DR
BROOKSVILLE FL 34601

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS ANGLIN, L Z
CITY-ST-ZIP 17448 TAVERN RD
BROOKSVILLE FL 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIAM T. OLSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00 352-688-9039
Date Daytime Phone #

CR2E037 (9/99)