

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90157 037 ****61.25

DOCUMENT # N08624

1. Entity Name

HERNANDO SHRINE CLUB HOLDING CORPORATION



Principal Place of Business

**13400 MONTOUR ST
BROOKSVILLE FL 34613
US**

Mailing Address

**13400 MONTOUR ST
BROOKSVILLE FL 34613
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

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, DARRYL W
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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **VP** ☐ Change ☒ Addition
NAME **BERNARD, ROBERT**
STREET ADDRESS **5986 DOWNSIDE LOOP**
CITY-ST-ZIP **CRYSTAL RIVER, FL 34429**

TITLE **VP** ☒ Delete
NAME **ROSSER, PAUL**
STREET ADDRESS **20 CHERRY ST**
CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE **D** ☐ Change ☒ Addition
NAME **ROSS, JOHN**
STREET ADDRESS **10253 HEATHCLIFF ST.**
CITY-ST-ZIP **SPRING HILL, FL 34608**

TITLE **S** ☐ Delete
NAME **MORGAN, WILLIAM A JR**
STREET ADDRESS **2047 BUTLER BLVD. 9217**
CITY-ST-ZIP **BROOKSVILLE FL 34613**

TITLE **D** ☐ Change ☒ Addition
NAME **ATTAVIANO, VINCENT**
STREET ADDRESS **13663 HUNTINGTON WOODS**
CITY-ST-ZIP **SPRING HILL, FL 34609**

TITLE **T** ☐ Delete
NAME **BASEHORE, FRED E**
STREET ADDRESS **9200 BURNHAM DR. 9235 BUTLER BLVD.**
CITY-ST-ZIP **BROOKSVILLE FL 34613 (9205)**

TITLE **D** ☐ Change ☒ Addition
NAME **TOMAS, CHESTER**
STREET ADDRESS **4599 ELWOOD DR.**
CITY-ST-ZIP **SPRING HILL, FL 34609**

TITLE **D** ☐ Delete
NAME **COTTON, LAWRENCE**
STREET ADDRESS **2380 DUSTIN CIR**
CITY-ST-ZIP **SPRING HILL FL 34608**

TITLE **D** ☐ Change ☒ Addition
NAME **DAVIS, ROBERT**
STREET ADDRESS **7050 WESTERN CIRCLE DR.**
CITY-ST-ZIP **BROOKSVILLE, FL 34613**

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

TITLE **D** ☐ Change ☒ Addition
NAME **PORTER, DALE**
STREET ADDRESS **11405 SANDHILL AVE**
CITY-ST-ZIP **SPRING HILL, FL 34608**

12. 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 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: *Johnston, Darryl W* TREAS *1/13/03 352-597-1703*

CR2E037 (10/02)