

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001435

FILED  
Feb 01, 2011  
Secretary of State

**Entity Name:** MARION COUNTY REPUBLICAN HEADQUARTERS, INC.

**Current Principal Place of Business:**

4000 E SILVER SPRINGS BLVD  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

4000 E SILVER SPRINGS BLVD  
OCALA, FL 34470

**New Mailing Address:**

**FEI Number:** 59-2229217

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ABSHIER, ROY  
6006 SE ABSHIER BLVD  
BELLEVIEW, FL 34420 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: SECR  
Name: ARMSTRONG, TERI  
Address: 4000 E SILVER SPRINGS BLVD  
City-St-Zip: OCALA FL, FL 34470 US

Title: D  
Name: DINKINS, LEWIS  
Address: 8331 SE 16TH TERRACE  
City-St-Zip: OCALA, FL

Title: TREA  
Name: ZUDYK, Z. A  
Address: 4000 E SILVER SPRINGS BLVD  
City-St-Zip: OCALA, FL 34470

Title: D  
Name: CAVANAUGH, MARGUERITE  
Address: 7545 SW 86TH LANE  
City-St-Zip: OCALA, FL 34476

Title: VC  
Name: BOYNTON, ANGELIA  
Address: PO BOX 832082  
City-St-Zip: OCALA, FL 34483

Title: C  
Name: ABSHIER, ROY  
Address: 6006 SE ABSHIER BLVD  
City-St-Zip: BELLEVIEW, FL 34420

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: Z. A. ZUDYK

TREA

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date