

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710166

Entity Name: TEMPLE TERRACE GOLF AND COUNTRY CLUB**Current Principal Place of Business:**

200 INVERNESS

TEMPLE TERRACE, FL 33617-4821

Current Mailing Address:

200 INVERNESS

TEMPLE TERRACE, FL 33617-4821 US

FEI Number: 59-0782745**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

WHITTEMORE, DONALD H

100 S ASHLEY STREET

SUITE 1900

TAMPA, FL 33602-5311 US

*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

Officer/Director Detail :

Title PRESIDENT
Name RICHARDSON, PAUL
Address 509 CLIFF DR.
City-State-Zip: TEMPLE TERRACE FL 33617

Title DIRECTOR
Name FROBERG, DAVID
Address 6104 SOARING AVE
City-State-Zip: TEMPLE TERRACE FL 33617

Title SECRETARY
Name BOWLES, SCOTT
Address 105 S. LOCKMOOR AVE.
City-State-Zip: TEMPLE TERRACE FL 33617

Title DIRECTOR
Name HARKNESS, SCOTT
Address 707 E. RIVER DR.
City-State-Zip: TEMPLE TERRACE FL 33617

Title DIRECTOR
Name TOWNSEND, JACK
Address 710 ROB ROY PLACE
City-State-Zip: TAMPA FL 33618

Title VP
Name MORA, ROBERT
Address 6615 GLENCOE DR.
City-State-Zip: TEMPLE TERRACE FL 33617

Title COO
Name MCCORMICK, SHAUN
Address 200 INVERNESS
City-State-Zip: TEMPLE TERRACE FL 33617-4821

Title TREASURER
Name NERTNEY, JOHN
Address 703 ARGYLE PLACE
City-State-Zip: TEMPLE TERRACE FL 33617

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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: SHAUN MCCORMICK

COO

04/21/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WHITTEMORE, DON
Address 6606 HEATHERTON CT.
City-State-Zip: TEMPLE TERRACE FL 33617

Title DIRECTOR
Name ALLEN, CLIFF
Address 313 E. FERN ST.
City-State-Zip: TAMPA FL 33604