2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2018
Secretary of State
CC4249279692

DOCUMENT# N14000002450

Entity Name: FRIENDS OF THE HACIENDA & HISTORIC NEW PORT RICHEY, INC.

Current Principal Place of Business:

5603 WYOMING AVENUE
N/A
NEW PORT RICHEY, FL 34652

Current Mailing Address:

POST OFFICE BOX 1557
NEW PORT RICHEY, FL 34656-1557 US

FEI Number: 46-5631153

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANGFORD, ROBERT H
5603 WYOMING AVENUE
N/A
NEW PORT RICHEY, FL 34652 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: ROBERT H LANGFORD 02/28/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	ISOLANI, JOSEPH E JR
Address	6624 GREEN ACRES BLVD N/A
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	VP
Name	GANN, GARY R
Address	10824 LUSCOMBE CT
City-State-Zip:	NEW PORT RICHEY FL 34654

Title	DIRECTOR
Name	BLACK, JULIE
Address	5746 WYOMING AVE.
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	GREY, CHUCK
Address	5324 US HWY 19
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	PRESIDENT
Name	LANGFORD, ROBERT H
Address	5603 WYOMING AVE.
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	EICHENBERGER, DAVE
Address	5746 WYOMING AVE.
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	AUSTIN, CAMI
Address	6624 GREEN ACRES BLVD N/A
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	SECRETARY
Name	ISOLANI, MARY
Address	6624 GREEN ACRES BLVD
City-State-Zip:	NEW PORT RICHEY FL 34655

Continues on page 2

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: ANN M JAMES TREASURER 02/28/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	TREASURER
Name	JAMES, ANN MARIE
Address	5603 WYOMING AVE
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	FERGUSON, RUTH
Address	5941 RIO DRIVE
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	O'DANIEL, TINA
Address	3149 SHALON ST
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	DIRECTOR
Name	SMITH, GREG M
Address	5822 INDIANA AVE
City-State-Zip:	NEW PORT RICHEY FL 34652