

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000010607

**FILED**  
**Feb 02, 2017**  
**Secretary of State**  
**CC2949452049**

**Entity Name:** EAST HILLSBOROUGH DEMOCRATIC CLUB, INC.

**Current Principal Place of Business:**

6615 SUMMER COVE DR.  
RIVERVIEW, FL 33578

**Current Mailing Address:**

P.O. BOX 3383  
BRANDON, FL 33509 US

**FEI Number:** 35-2580525

**Certificate of Status Desired:** No

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

FORE, DONNA L  
6615 SUMMER COVE DR.  
RIVERVIEW, FL 33578 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 P  
Name FORE, DONNA L  
Address 6615 SUMMER COVE DR.  
City-State-Zip: RIVERVIEW FL 33578

Title T  
Name FITZHENRY, JOHN  
Address 3032 WISTER CR.  
City-State-Zip: VALRICO FL 33596

Title D  
Name TRADER, KEITH  
Address 4007 EASTRIDGE DR  
City-State-Zip: VALRICO FL 33596

Title VP  
Name RADULICH, CHRISTOPHER  
Address 139 SHELL FALLS DR.  
City-State-Zip: APOLLO BEACH FL 33572

Title S  
Name GALLUN, KATHY  
Address 4312 GLENDON PL  
City-State-Zip: VALRICO FL 33596

Title D  
Name WOOD, RAY  
Address 1150 COUNTRY TRACE  
City-State-Zip: BRANDON FL 33511

*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: DONNA L FORE**

**PRESIDENT**

**02/02/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date