

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712147

FILED  
Apr 23, 2010  
Secretary of State

**Entity Name:** CAPE CORAL ITALIAN AMERICAN CLUB OF LEE COUNTY, INC.

**Current Principal Place of Business:**

UNTY, INC.  
4725 VINCENNES BLVD.  
CAPE CORAL, FL 339049113

**New Principal Place of Business:**

**Current Mailing Address:**

UNTY, INC.  
4725 VINCENNES BLVD.  
CAPE CORAL, FL 339049113

**New Mailing Address:**

FEI Number: 59-1555807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DELGROSS, ROBERT  
4021 SE 19TH AVE.  
#102  
CAPE CORAL, FL 33904 US

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

DOYLE, RITA  
3043 SW 24 TH AVE  
CAPE CORAL, FL 33914 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: RITA DOYLE

04/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: FRANCONI, PATRICIA  
Address: 2261 CAPE HEATHER CIRCLE  
City-St-Zip: CAPE CORAL, FL 33904

Title: P  
Name: DOYLE, RITA  
Address: 3043 SW 24TH AVE  
City-St-Zip: CAPE CORAL, FL 33914

Title: S  
Name: MADDEN, ROSE  
Address: 1748 EMERALD COVE CIRCLE  
City-St-Zip: CAPE CORAL, FL 33991

Title: T  
Name: CHRISTIANO, LUCILLE  
Address: 7128 BLANQUILLA  
City-St-Zip: FORT MYERS, FL 33908

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: RITA DOYLE

P

04/23/2010

Electronic Signature of Signing Officer or Director

Date