# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jan 09, 2003 8:00 am**
**Secretary of State**
01-09-2003 90084 023 ****61.25

DOCUMENT # 723283

1. Entity Name

ITALIAN-AMERICAN CLUB OF GREATER CLEARWATER, INC

| Principal Place of Business | Mailing Address |
|---|---|
| 200 MCMULLEN BOOTH RD<br>CLEARWATER FL 33759 | 200 MCMULLEN BOOTH RD<br>CLEARWATER FL 33759 |

☒ CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 23-7407221 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

IAMARINO, FRANK J
3190 GLEN RIDGE DRIVE
PALM HARBOR FL 34685

**7. Name and Address of New Registered Agent**

Name SALVATORE ALESI

Street Address (P.O. Box Number is Not Acceptable)

2529 ESTANCIA BLVD.

City CLEARWATER FL Zip Code 33761

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Salvatore Alesi SALVATORE ALESI, TREASURER 1/6/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS $61.25**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>TRAPANI, DOLORES<br>13300 INDIAN ROCKS ROAD<br>LARGO FL 33774 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>MERCANDANTI, BEN<br>P.O. BOX 262<br>CHRYSTAL BEACH FL.34681 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>ODORISIO, ANTHONY<br>2357 ASHMORE DR<br>CLEARWATER FL 33763 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>IAMAHINO, FRANK<br>3190 GLENRIDGE DR<br>PALM HARBOR FL 34685 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>ALESI, SALVATORE<br>2529 ESTANCIA BLVD.<br>CLEARWATER FI 33761 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GIUFFREDA, EDITH<br>644 ISLAND WAY #103<br>CLEARWATER FL 33767 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SCOLARI, JOSEPH<br>2209 UTOPIAN DR. E #221<br>CLEARWATER FL.33763 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>RIEDMONT, DAVID<br>3580 INDIGO POND DRIVE<br>PALM HARBOR FL 34685 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BALCASTRO, FRANK<br>1229 GRANADA AV<br>CLEARWATER FL 33764 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowe

**SIGNATURE:** Salvatore Alesi **ALESI, SALVATORE** 1/6/2003 (727)797-1258

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR