

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15237

1. Entity Name

OSCEOLA COUNTY LODGE #2523 ORDER OF SONS OF ITAL

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90074 048 \*\*\*\*61.25

Principal Place of Business

Mailing Address

524 MISSISSIPPI AVENUE  
ST CLOUD FL 34769-3052  
US

524 MISSISSIPPI AVENUE  
ST CLOUD FL 34769-3052  
US

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

59-2771497

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLONNA, JO ANN  
524 MISSISSIPPI AVENUE  
ST CLOUD FL 34769

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

560 Bitterwood Ct.

City Kissimmee

FL

Zip Code 34743

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.

SIGNATURE Dorothy Raciti

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete  
NAME DEFRANCISCO, LARRY  
STREET ADDRESS 525 ELMWOOD COURT  
CITY-ST-ZIP KISSIMMEE FL 34743

Trustee ☐ Change ☐ Addition  
NAME Paul Uccello  
STREET ADDRESS 954 Whisler Ct.  
CITY-ST-ZIP ST CLOUD, FL 34769

P ☐ Delete  
NAME COLONNA, JOANN  
STREET ADDRESS 524 MISSISSIPPI AVE  
CITY-ST-ZIP ST CLOUD FL 34769

Trustee ☐ Change ☐ Addition  
NAME Joe Perrone  
STREET ADDRESS 3271 Buffalo Ct.  
CITY-ST-ZIP Kissimmee FL 34741

VP ☐ Delete  
NAME DE GORI, ROBERT  
STREET ADDRESS 419 RIDER CIRCLE  
CITY-ST-ZIP KISSIMMEE FL 34743

Trustee ☐ Change ☐ Addition  
NAME Nick Ferrali  
STREET ADDRESS 245 La Paz Dr.  
CITY-ST-ZIP Kissimmee, FL 34743

T ☐ Delete  
NAME RACITI, DOROTHY  
STREET ADDRESS 560 BITTERWOOD COURT  
CITY-ST-ZIP KISSIMMEE FL 34743

T ☐ Change ☐ Addition  
NAME Maria Uccello  
STREET ADDRESS 954 Whisler Ct.  
CITY-ST-ZIP ST CLOUD, FL 34769

D ☐ Delete  
NAME TESTA, JERRY  
STREET ADDRESS 1781 KINGS CHARVES DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34744

Financial Secy. ☐ Change ☐ Addition  
NAME Dorothy Raciti  
STREET ADDRESS 560 Bitterwood Ct.  
CITY-ST-ZIP Kissimmee, FL 34743

T ☐ Delete  
NAME COLETTI, VIVETTA  
STREET ADDRESS 166 PINWOOD CIRCLE  
CITY-ST-ZIP KISSIMMEE FL 34743

Trustee ☐ Change ☐ Addition  
NAME Sue Ferrali  
STREET ADDRESS 245 La Paz Dr.  
CITY-ST-ZIP Kissimmee FL 34743

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 empowered.

SIGNATURE:

Dorothy Raciti  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dorothy Raciti

4-14-00

Date

407-348-6392

Daytime Phone #

CR2E037 (9/99)