2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State
03-17-2006 90126 041 ****61.25

DOCUMENT # N15237

1. Entity Name
OSCEOLA COUNTY LODGE #2523 ORDER OF SONS OF ITALY IN AMERICA, INC.

Principal Place of Business	Mailing Address
419 RIDER CIR KISSIMMEE, FL 34743 US	PO BOX 421816 KISSIMMEE, FL 34742 US

2. Principal Place of Business	3. Mailing Address
3071 CROSS CREEK CT.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SAINT CLOUD, FL.	City & State
Zip: 34769 Country: U.S.	Zip Country

01052006 Chg-NP CR2E037 (11/05)

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
DEGORI, ROBERT N 419 RIDER CIRCLE KISSIMMEE, FL 34743	Name: FRANK COLONNA Street Address (P.O. Box Number is Not Acceptable): 3071 CROSS CREEK CT. City: SAINT CLOUD FL Zip Code: 34769

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: FRANK COLONNA PRES. Frank Colonna Pres. 03-14-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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	P DEGORI, ROBERT 419 RIDER CIR KISSIMMEE, FL 34743	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. FRANK COLONNA 3071 CROSS CREEK CT. SAINT CLOUD, FL. 34769 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COLONNA, FRANK 3071 CROSS CREEK CT SAINT CLOUD, FL 34769	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. ANTHONY CIANCIATA 100 CYPRESS AVE. SAINT CLOUD, FL. 34769 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DERIENZO, ANN 259 CITRUS DR. KISSIMMEE, FL 34743	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. GERTRUDE DORRIES 2021 PINENEEDLE TRAIL KISSIMMEE, FL. 34746 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T UCCELLO, MARIA 954 WHISTLER CT SAINT CLOUD, FL 34769	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JOE PERRONE 3271 BUFFALO CT. KISSIMMEE, FL. 34741 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FS INGOGLIA, MARY 5155 BULLS RD. SAINT CLOUD, FL 34772	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD UCCELLO, PAUL 954 WHISTLER CT. SAINT CLOUD, FL 34769	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Frank Colonna FRANK COLONNA 03-14-06 407-957-4668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #