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NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N21578** **(2)**

1. Corporation Name

SONS OF ITALY OF AMERICA 2436, INC.

Principal Place of Business	Mailing Address
P.O. BOX 5838 KEY WEST FL 33045 US	P.O. BOX 5838 KEY WEST FL 33045-5838 US

3. Date Incorporated or Qualified: **06/17/1987**
3a. Date of Last Report: **10/28/1996**

4. FEI Number: **NOT APPLICABLE** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 SONS OF ITALY LODGE 2436	26 P.O. BOX 5838
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: KEY WEST, FL.	28 City & State: KEY WEST, FL.
24 Zip: 33045 25 Country: U.S.A.	29 Zip: 33045 30 Country: U.S.A.

9. Name and Address of Current Registered Agent

BUNZEL, DAWN
1213 14TH ST., #Q
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Dawn Bunzel DAWN BUNZEL 308-29-0035 2/4/97
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV BUNZEL, DAWN 1213 14TH ST. LOT 12 KEY WEST FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP PRESIDENT BUNZEL, DAWN 1213 14TH ST. LOT 12 KEY WEST, FL.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LUDWIG, THERESA 1523 LAIRD STR KEY WEST FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DV VICE PRESIDENT NANCY MARRONE TRINITY PA. KEY, FLORIDA	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DO GIOVANNUCCI, JULIUS 127 KEY HAVEN RD. KEY WEST FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SAME	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT VAGNINI, JIM 1508 19TH STR KEY WEST FL	☒ DELETE DO	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	DO FINANCIAL SECRETARY GELSIE JACOBEMIS 3312 NORTHSIDE DR. KEY WEST, FL.	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT GRIFFIN, JOHN 3312 DUCK AVENUE KEY WEST FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	AS YET UNDETERMINED	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dawn Bunzel SIGNATURE REQUIRED DAWN B UNZEL 2/4/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone # 0024751