

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38262

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** N.Y.C. DEPARTMENT OF SANITATION RETIREES & ASSOCIATES OF WEST FLORIDA, INC.

**Current Principal Place of Business:**

8228 RHANBUOY RD.  
SPRING HILL, FL 34606 US

**New Principal Place of Business:**

5135 CARISSA CT  
SPRING HILL, FL 34606 US

**Current Mailing Address:**

8228 RHANBUOY RD.  
SPRING HILL, FL 34606

**New Mailing Address:**

5135 CARISSA CT  
SPRING HILL, FL 34606 US

FEI Number: 58-1900885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONNOLLY, ROBERT  
8228 RHANBUOY RD.  
SPRING HILL, FL 34606 US

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

DEGAETANO, GARY R  
5135 CARISSA CT  
SPRING HILL, FL 34606 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: GARY R. DEGAETANO

01/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HAMM, WILLIAM  
Address: 7371 BOTANICAL DRIVE  
City-St-Zip: SPRING HILL, FL 34607 US

Title: D  
Name: STROM, RICHARD  
Address: 13943 TALMAGE LOOP  
City-St-Zip: HUDSON, FL 34667 US

Title: D  
Name: CONNOLLY, ROBERT  
Address: 8228 RHANBUOY ROAD  
City-St-Zip: SPRING HILL, FL 34606 US

Title: T  
Name: D'AMBROSIA, LEONARD  
Address: 8055 BELLEVISTA CT.  
City-St-Zip: SPRING HILL, FL 34606 US

Title: T  
Name: MENNA, ANTHONY  
Address: 8104 ROSE PETAL COURT  
City-St-Zip: PORT RICHEY, FL

Title: T  
Name: CAZZALINO, JOSEPH  
Address: 13541 WOODSIDE DRIVE  
City-St-Zip: BAYONET POINT, FL 34667 US

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: GARY R. DEGAETANO

TREA

01/11/2011

Electronic Signature of Signing Officer or Director

Date