

FILE NOW: FILING FEE IS \$61.25

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Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N92000000593 (5)
 1. Corporation Name
THE GULF COAST ITALIAN CULTURE SOCIETY, INC.



Principal Place of Business 2149 PINE GARDENS TRAIL SARASOTA FL 34231	Mailing Address 2149 PINE GARDENS TRAIL SARASOTA FL 34231-6927
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3. Date Incorporated or Qualified 12/03/1992	3a. Date of Last Report 02/16/1996
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

MANNINO, I. JOSEPH
2149 PINE GARDENS TR
SARASOTA FL 34231

10. Name and Address of New Registered Agent

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

FL

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 _____ (NOTE: Registered Agent's signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	P	<input type="checkbox"/> DELETE
NAME	THURSTON, GABRIELLA	
STREET ADDRESS	5400 OCEAN BLVD 219 Stone Briar Creek Dr	
CITY-ST-ZIP	SIESTA KEY FL 34242 Venice FL 33597	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CASTRABERTI, ARTUUR	
STREET ADDRESS	4348 BRANDYWINE DR.	
CITY-ST-ZIP	SARASOTA FL 34241	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MANNINO, I. JOSEPH	
STREET ADDRESS	2149 PINE GARDENS TRAIL	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ENRIGHT, JAMIE	
STREET ADDRESS	3741 DUNCAN PL	
CITY-ST-ZIP	SARASOTA FL 34234	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CORSENTINO, PATRICK B	
STREET ADDRESS	8021 BOBCAT CIRCLE	
CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MCENTEE, MARIE	
STREET ADDRESS	4473 LONG MEADOW	
CITY-ST-ZIP	SARASOTA FL 34235	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Richard Succchetti	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	7767 STACEY LAKE	
1.3 STREET ADDRESS	Sarasota FL 34231	
1.4 CITY-ST-ZIP	Sarasota FL 34231	
2.1 TITLE	D. Marie Corsetino	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	8021 Bobcat Dr	
2.3 STREET ADDRESS	Sarasota FL 34238	
2.4 CITY-ST-ZIP	Sarasota FL 34238	
3.1 TITLE	Rae Chatson	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	5185 Flicker Field Cr.	
3.3 STREET ADDRESS	Sarasota FL 34231	
3.4 CITY-ST-ZIP	Sarasota FL 34231	
4.1 TITLE	D. Ruth NAPOLIELLO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	1050 Longboat Key Rd	
4.3 STREET ADDRESS	Sarasota FL 34228	
4.4 CITY-ST-ZIP	Sarasota FL 34228	
5.1 TITLE	VP-EO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Corsetino, Patrick	
5.3 STREET ADDRESS	8021 Bobcat Cr	
5.4 CITY-ST-ZIP	Sarasota FL 34238	
6.1 TITLE	D. Ruth NAPOLIELLO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	1050 Longboat Key Rd	
6.3 STREET ADDRESS	Sarasota FL 34228	
6.4 CITY-ST-ZIP	Sarasota FL 34228	

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.

CR2E037 (9/96)

Document No. N. 92000000543(5)

The Gulf Coast Italian
Culture Society

MANNINO I. Joseph
2149 Pine Garden Trail
Sarasota FL 34231

Block 12

D. Piero Freitag
3834 Surrey Court
Sarasota FL 34235

D. Joanie Enright
PO Box 25423
Sarasota FL 34277