

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000593

FILED  
Apr 10, 2011  
Secretary of State

**Entity Name:** THE GULF COAST ITALIAN CULTURE SOCIETY, INC.

**Current Principal Place of Business:**

DOROTHY LEONE  
4294 REFLECTIONS PKWY  
SARASOTA, FL 34233 US

**New Principal Place of Business:**

**Current Mailing Address:**

DOROTHY LEONE  
4294 REFLECTIONS PKWY  
SARASOTA, FL 34233 US

**New Mailing Address:**

**FEI Number:** 65-0369121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEONE, DOROTHY  
4294 REFLECTIONS PKWY  
SARASOTA, FL 34233 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: LEONE, DOROTHY  
Address: 4294 REFLECTIONS PKWY  
City-St-Zip: SARASOTA, FL 34233

Title: VP  
Name: CAGLIOSTRO, ANTHONY  
Address: 500 THEESPLANADE N., APT 704  
City-St-Zip: VENICE, FL 34285

Title: S  
Name: RODERICK, ELLEN  
Address: 770 S PALM AVE  
City-St-Zip: SARASOTA, FL 34236

Title: P  
Name: KORP, WILLIAM  
Address: 156 EMERSON DRIVE  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: AMEDEO, ROBERT  
Address: PO BOX 8147  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D  
Name: MOCCIA, JOSEPH  
Address: 536 KETCH LANE  
City-St-Zip: LONGBOAT KEY, FL 34228

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:** DOROTHY LEONE

TREA

04/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date