

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07956

FILED  
Mar 08, 2005  
Secretary of State

**Entity Name:** ITALIAN AMERICAN WAR VETERANS OF THE UNITED STATES, INC. POST 4 ORLANDO, FLORIDA

**Current Principal Place of Business:**

ITALIAN AMERICAN SOCIAL CLUB  
PO BOX 57411  
ORLANDO, FL 328574111 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 570876  
ORLANDO, FL 328570876 US

**New Mailing Address:**

**FEI Number:** 59-2597227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BADOLATO, GENE  
1694 WINGSPAN WAY  
WINTER SPRINGS, FL 32708 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: CD ( ) Delete  
Name: DI GIROLMO, VINCENT  
Address: 1012 PROVIDENCE LA  
City-St-Zip: OVIEDO, FL 32765 US

Title: SVCD ( ) Delete  
Name: BARBGALLO, SAMUEL  
Address: 3636 ECONLOCKHATCHEE TR  
City-St-Zip: ORLANDO, FL 32817 US

Title: TD ( ) Delete  
Name: BADOLATO, EUGENE  
Address: 1694 WINGSPAN WAY  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: AS ( ) Delete  
Name: BOVE, RALPH  
Address: 1913 LAHINCH CT.  
City-St-Zip: ORLANDO, FL 32826 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: ROBINSON, DAVID  
Address: 5375 KESWICK CT.  
City-St-Zip: ORLANDO, FL 32812 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AD (X) Change ( ) Addition  
Name: DURSO, RALPH  
Address: 2763 SNOWGOOSE LANE.  
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GENE BADOLATO

TRES

03/08/2005

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

\_\_\_\_\_  
Date