

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33486

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** THE ITALIAN-AMERICAN CLUB OF LAKE COUNTY, INC.

**Current Principal Place of Business:**

FIRST UNITED METHODIST CHURCH  
600 W. IANTHE  
TAVARES, FL 32778 US

**New Principal Place of Business:**

TAVARES CIVIC CENTER  
100 E CAROLINE ST  
TAVARES, FL 32778 US

**Current Mailing Address:**

P.O. BOX 1583  
EUSTIS, FL 32727 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

SARGENT, FRANK  
509 JUNIPER WAY  
TAVARES, FL 32778 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: P  
Name: SARGENT, FRANK PRES  
Address: 509 JUNIPER WAY  
City-St-Zip: TAVARES, FL 32728

Title: VP  
Name: DEGREGORIO, JULIUS VP  
Address: 2710 E. WASHINGTON AVE  
City-St-Zip: EUSTIS, FL 32726

Title: T  
Name: PLUCHINO, JOSEPH S TREAS  
Address: 35406 HIGHLAND DRIVE  
City-St-Zip: EUSTIS, FL 32736

Title: S  
Name: MATTHEWS, MARY SEC  
Address: 149 E SEMINOLE AVE  
City-St-Zip: EUSTIS, FL 32726

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: JOSEPH S PLUCHINO

TRES

03/25/2010

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

\_\_\_\_\_  
Date