2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2011
Secretary of State

DOCUMENT# N92000000593

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