

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712147

**FILED**  
**Jan 22, 2015**  
**Secretary of State**  
**CC3646262406**

**Entity Name:** CAPE CORAL ITALIAN AMERICAN CLUB OF LEE COUNTY, INC.

**Current Principal Place of Business:**

4725 VINCENNES BLVD  
CAPE CORAL, FL 33904

**Current Mailing Address:**

4725 VINCENNES BLVD  
CAPE CORAL, FL 33904

**FEI Number:** 59-1555807

**Certificate of Status Desired:** No

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

RICCIARDI, RICHARD M ATTY  
1217 CAPE CORAL PKWY E BOX 121  
CAPE CORAL, FL 33904 US

*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

**Officer/Director Detail :**

Title P  
Name SANGIOVANNI, CATHERINE  
Address 2219 SE 27TH STREET  
City-State-Zip: CAPE CORAL FL 33904

Title VP  
Name SANGIOVANNI, RALPH  
Address 2219 SE 27TH STREET  
City-State-Zip: CAPE CORAL FL 33904

Title V  
Name CRUM, STEPHEN  
Address 306 SE 31ST TERRACE  
City-State-Zip: CAPE CORAL FL 33904

Title S  
Name JONES, CLAUDIA  
Address 1405 NW 1ST STREET  
City-State-Zip: CAPE CORAL FL 33993

Title D  
Name SARACINO, RONALD  
Address 2832 SE 18TH COURT  
City-State-Zip: CAPE CORAL FL 33904

Title TR  
Name SARACINO, LACEY  
Address 2832 SE 18TH COURT  
City-State-Zip: CAPE CORAL FL 33904

*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:** CATHERINE SANGIOVANNI

**PRESIDENT**

**01/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date