

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000001557

Entity Name: BENVENUTO AMERICANS OF ITALIAN HERITAGE CHARITIES
INC.**FILED**
Jan 02, 2014
Secretary of State
CC6555167125**Current Principal Place of Business:**1337 ABERCROMBIE WAY
THE VILLAGES, FL 32162**Current Mailing Address:**1337 ABERCROMBIE WAY
THE VILLAGES, FL 32162**FEI Number: 80-0791779****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DIMARE, ANTHONY
425 TROY LOOP
THE VILLAGES, FL 32162 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	TRICERI, DANIEL
Address	1337 ABERCROMBIE WAY
City-State-Zip:	THE VILLAGES FL 32162
Title	D
Name	BOLAND, JAMES
Address	1376 MURRELLS INLET LOOP
City-State-Zip:	THE VILLAGES FL 32162
Title	VP
Name	PINSONNEAULT, ROBERT
Address	826 PICKETT
City-State-Zip:	THE VILLAGES FL 32163

Title	S
Name	DIMARE, ANTHONY
Address	425 TROY LOOP
City-State-Zip:	THE VILLAGES FL 32162
Title	TREASURER
Name	MAFFUCCIO, EDWARD A
Address	1477 DALZELL COURT
City-State-Zip:	THE VILLAGES FL 32162
Title	DIRECTOR
Name	TORNAME, SALVATORE
Address	1743 YANKEE CLIPPER RUN
City-State-Zip:	THE VILLAGES FL 32162

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: ANTHONY DIMARE**SECRETARY****01/02/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date