#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000593

Entity Name: GULF COAST ITALIAN CULTURE SOCIETY, INC.

**FILED** Jan 30, 2022 **Secretary of State** 3460982572CC

#### **Current Principal Place of Business:**

JULIA BONDARENKO 1266 THORNAPPLE DRIVE OSPREY, FL 34229

### **Current Mailing Address:**

GULF COAST ITALIAN CULTURE SOCIETY, INC.

PO BOX 2591

SARASOTA, FL 34230 US

FEI Number: 65-0369121 Certificate of Status Desired: No

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

THOMAS, PENNY ROSE 4112 PINAR DRIVE BRADENTON, FL 34210 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: PENNY THOMAS 01/30/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title S, D Title **PRESIDENT** 

RODERICK, ELLEN Name Name BONDARENKO, JULIA Address 770 S PALM AVE Address 1266 THORNAPPLE DRIVE

# 1003

OSPREY FL 34229 City-State-Zip: SARASOTA FL 34236 City-State-Zip:

Title **TREASURER** Title Name THOMAS, PENNY

MERCURIO, LINDA Name 4112 PINAR DRIVE Address

5770 DEER HOLLOW LANE, W Address City-State-Zip: **BRADENTON FL 34210** 

City-State-Zip: SARASOTA FL 34232

ASST. SECRETARY, SECRETARY Title Title DIRECTOR

Name HERMAN, JUDY AHERN, LINDA Name

Address 6150 TURNBURY PARK DRIVE Address

4240 PRESIDENTIAL AVENUE #103

CIRCLE, E City-State-Zip: SARASOTA FL 34243

**BRADENTON FL 34203** City-State-Zip:

Title **DIRECTOR** 

ARFIELD, GEORGE Name Name HALL, JERRY

1921 MONTE CARLO DRIVE Address Address 301A

6508 WATERFORD CIRCLE

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34238

## Continues on page 2

**DIRECTOR** 

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.

Title

01/30/2022 SIGNATURE: PENNY THOMAS TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name BLOOM, GORDON

Address 5080 WINTER ROSE WAY

City-State-Zip: VENICE FL 34293