

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005582

Entity Name: ISDA FRATERNAL ASSOCIATION**Current Principal Place of Business:**419 WOOD ST
PITTSBURGH, PA 15222**Current Mailing Address:**419 WOOD ST
PITTSBURGH, PA 15222 US**FEI Number:** 25-1091698**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC.
3030 N. ROCKY POINT DR. STE 150A
TAMPA, FL 33607 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:** BILL HAVRE

02/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name RUSSO, BASIL M
Address 3 SHOREBY DRIVE
City-State-Zip: BRATENAHL OH 44108

Title VP
Name CIABATTONI, WARREN
Address 182 IOWA ST
City-State-Zip: GREENSBURG PA 15601

Title DIRECTOR
Name BALDIN, GINO G
Address 810 MANISTEE AVE
City-State-Zip: SCHERERVILLE IN 46375

Title DIRECTOR
Name BASSO, ANTHONY R
Address 6733 CALIFORNIA AVE
City-State-Zip: HAMMOND IN 46323

Title DIRECTOR
Name CIAMBRONE, ANGELO
Address 1515 HALSTED ST
City-State-Zip: CHICAGO HGTS IL 60411

Title DIRECTOR
Name FRANK, MARIE
Address 4599 QUEEN MARY DR
City-State-Zip: SO EUCLID OH 44121

Title DIRECTOR
Name KOWALCYZK, GEORGIANNA
Address 1124 COLLEGE AVE
City-State-Zip: NIAGARA FALLS NY 14305

Title DIRECTOR
Name PORTO, DANETTE
Address 79 N PARKER AVE
City-State-Zip: BUFFALO NY 14216

Continues on page 2

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: JOANN BLACKWELL**CONTROLLER**

02/07/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name INNAMORATO, MARY F
Address 137 HIDDEN VALLEY DR
City-State-Zip: PITTSBURGH PA 15237

Title DIRECTOR
Name MOCELLO, PATRICIA
Address 703 FERNHILL AVE
City-State-Zip: PITTSBURGH PA 15226

Title DIRECTOR
Name CARLUCCI, JOANN
Address 4207 HOMESTEAD DUQ ROAD
City-State-Zip: WEST MIFFLIN PA 15122

Title DIRECTOR
Name STANZIONE, LOUISE
Address 419 WOOD ST
City-State-Zip: PITTSBURGH PA 15222

Title DIRECTOR
Name CERRONE, DANNY P
Address 120 LAURIE DRIVE
City-State-Zip: PITTSBURGH PA 15235

Title DIRECTOR
Name MAHOFSKI, EUGENE J
Address 406 ELLIOT LANE
City-State-Zip: PITTSBURGH PA 15229

Title COMPTROLLER
Name BLACKWELL, JOANN
Address 419 WOOD ST
City-State-Zip: PITTSBURGH PA 15222

Title DIRECTOR
Name MANFREDI, EDWARD
Address 419 WOOD ST
City-State-Zip: PITTSBURGH PA 15222