## 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT#712147** 

FILED Nov 25, 2013 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

4725 VINCENNES BLVD CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

4725 VINCENNES BLVD CAPE CORAL, FL 33904

FEI Number: 59-1555807 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New 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: RICHARD RICCIARDI

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

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

Title: VP

Name: GORLA, JOHN

Address: 1802 NW EMBERS TERRACE City-St-Zip: CAPE CORAL, FL 33993

Title: VP

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

Title: 9

Name: ROVERE, ANGELA

Address: 602 MCGREGOR PARK CIRCLE

City-St-Zip: FORT MYERS, FL 33908

Title:

Name: GANSHEIMER, FAITH
Address: 807 SW 56TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title:

 Name:
 D'AMORE, VICTORIA

 Address:
 1727 SW 11TH AVE

 City-St-Zip:
 CAPE CORAL, FL 33991

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: VICTORIA D'AMORE T 11/25/2013