2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008
Secretary of State

DOCUMENT# 717303

Entity Name: NAPLES ITALIAN-AMERICAN CLUB, INC.

Current Principal Place of Business:

7035 AIRPORT RD NORTH
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

7035 AIRPORT RD NORTH
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-1450004 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORANI, RENALD P
13100 HAMILTON HARBOUR DR
UNIT G-1
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	PRES	( ) Delete
Name:	LE CATTA, RAYMOND	
Address:	3993 ISLA CIUDAD CT	
City-St-Zip:	NAPLES, FL 34119 US	
Title:	2ND	( ) Delete
Name:	VIVONETTO, PETER	
Address:	10149 WINCHESTER WOODS RD	
City-St-Zip:	NAPLES, FL 34109 US	
Title:	1VP	( ) Delete
Name:	LOMONTO, CHARLES	
Address:	8908 LELY ISLAND CIRCLE	
City-St-Zip:	NAPLES, FL 34113 US	
Title:	TREA	( ) Delete
Name:	MORANI, RENALD P	
Address:	13100/G-1 HAMILTON HARBOUR DR	
City-St-Zip:	NAPLES, FL 34110 US	
Title:	SECY	( ) Delete
Name:	ROMEO, MARILYN	
Address:	1830 LEAMINGTON LANE	
City-St-Zip:	NAPLES, FL 34109 US	
Title:	CRS	( ) Delete
Name:	HELEN, YOUNG	
Address:	3390 CERRITO COURT	
City-St-Zip:	NAPLES, FL 34109 TR	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RENALD P MORANI TREA 04/07/2008
Electronic Signature of Signing Officer or Director — Date