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May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **728269** **(2)**

1. Corporation Name

ITALIAN AMERICAN CLUB OF SOUTH BREVARD, INC.

Principal Place of Business	Mailing Address
1471 CYPRESS AVENUE MELBOURNE FL 32935	1471 CYPRESS AVENUE MELBOURNE FL 32935

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 01/17/1974

4. FEI Number: 23-7385209 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~SORRENTINO, ALBERT~~
~~1054 BACON CIRCLE~~
~~PALM BAY FL 32905~~

10. Name and Address of New Registered Agent

81 Name: DENNIS GHEZZI
82 Street Address (P.O. Box Number is Not Acceptable): 2455 BURNS AVE.
83
84 City: MELBOURNE FL 85 Zip Code: 32935

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Dennis Ghezzi — 4-25-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TR	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	RUSSO, ANTHONY M		1.2 NAME	GHEZZI DENNIS	
STREET ADDRESS	3203 EASTMAN AVE NE		1.3 STREET ADDRESS	2455 BURNS AVE.	
CITY-ST-ZIP	PALM BAY FL		1.4 CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	PD	☒ DELETE	2.1 TITLE	T	☒ Change ☐ Addition
NAME	SORRENTINO, ALBERT		2.2 NAME	GAWRONSKI EDWARD	
STREET ADDRESS	1054 BACON CIRCLE		2.3 STREET ADDRESS	1686 TUERS ROAD	
CITY-ST-ZIP	PALM BAY FL		2.4 CITY-ST-ZIP	MELBOURNE, FL. 32935	
TITLE	VPD	☐ DELETE	3.1 TITLE	TR.	☒ Change ☐ Addition
NAME	AMATO, MARY G.		3.2 NAME	MUSANTE JOSEPH	
STREET ADDRESS	2800 ALGONQUIN DR.		3.3 STREET ADDRESS	3005 CLEARLAKE ROAD #1	
CITY-ST-ZIP	MELBOURNE FL		3.4. CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	TD	☒ DELETE	4.1 TITLE	TR.	☒ Change ☐ Addition
NAME	DEBLASIO, PAT		4. 2 NAME	SORRENTINO MIKE	
STREET ADDRESS	3089 WOODSMILL DR		4.3 STREET ADDRESS	2886 SABRINA ST. N.E.	
CITY-ST-ZIP	MELBOURNE FL		4.4 CITY-ST-ZIP	PALM BAY FL. 32905	
TITLE	RS	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SORRENTINO, BERNADETTE		5.2 NAME		
STREET ADDRESS	1054 BACON CIRCLE		5.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BAY FL		5.4 CITY-ST-ZIP		
TITLE	CD	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CASULI, NICKI		6.2 NAME		
STREET ADDRESS	2601 KINGDOM AVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Edward Gawronski 4/15/98 (407) 259-6730