

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90044 047 ****61.25

DOCUMENT # 728269

1. Entity Name
ITALIAN AMERICAN CLUB OF SOUTH BREVARD, INC.



Principal Place of Business
1471 CYPRESS AVENUE
MELBOURNE, FL 32935

Mailing Address
1471 CYPRESS AVENUE
MELBOURNE, FL 32935

24 628000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

SAME

Suite, Apt. #, etc.

SAME

City & State

City & State

02242004 Chg-NP CR2E037 (10/03)

4. FEI Number
~~23-7365209~~ 59-3010458

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTALDO, BEATRICE
1241 CREEL RD NE
1
PALM BAY, FL 32905

Name ROBERT F. GRETTA

Street Address (P.O. Box Number is Not Acceptable)
354 ALBEDO AV. S.E.

City PALM BAY

FL

Zip Code 32909

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert F. Gretha

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/16/04

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Delete
NAME	CASTALDO, BEATRICE	
STREET ADDRESS	1241 CREEL RD NE	
CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	TD	☒ Delete
NAME	TRAINA, BENJAMIN	
STREET ADDRESS	1862 CATO COURT	
CITY-ST-ZIP	INDIALANTIC, FL 32903	
TITLE	VPD	☒ Delete
NAME	CONA, FRANK	
STREET ADDRESS	310 LAGOCI #204	
CITY-ST-ZIP	W MELBOURNE, FL 32904	
TITLE	1TR	☒ Delete
NAME	ALESIO, AUDREY	
STREET ADDRESS	1126 EDDIE ALLEN ROAD	
CITY-ST-ZIP	MELBOURNE, FL 32901	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	ROBERT GRETTA	
STREET ADDRESS	354 ALBEDO AV. S.E.	
CITY-ST-ZIP	PALM BAY FL 32909	
TITLE	VICE-PRESIDENT	☒ Change ☒ Addition
NAME	MADDALENA CRISCI	
STREET ADDRESS	1555 N. HWY A1A #205	
CITY-ST-ZIP	INDIALANTIC FL 32903	
TITLE	TREASURER	☒ Change ☐ Addition
NAME	EMILY PLACIDO	
STREET ADDRESS	2764 EMERSON ST.	
CITY-ST-ZIP	PALM BAY FL 32909	
TITLE	RECORDING SECRETARY	☒ Change ☐ Addition
NAME	BARBARA URRETA	
STREET ADDRESS	2400 CORAL RIDGE CIRCLE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	CORRESPONDING SECRETARY	☒ Change ☐ Addition
NAME	BETTY CASTALDO	
STREET ADDRESS	1241 CREEL RD N.E.	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert F. Gretha

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/04

Date

321-242-8044

Daytime Phone #