

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90398 006 ****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
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country



04122006 Chg-NP CR2E037 (11/05)

6. Name and Address of Current Registered Agent MADDALENA, CRISCI 1555 N HWY A1A, # 205 INDIALANTIC, FL 32903	
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7. Name and Address of New Registered Agent Name Alfonso Bruner Street Address (P.O. Box Number is Not Acceptable) 412 School Road # 89 City Indian Harbour Beach FL Zip Code 32937	
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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 Alfonso Bruner Signature, or typed or printed name of registered agent and title if applicable.	DATE 4/13/06 (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Delete
P CRISCI, MADDALENA 1555 N HWY A1A, # 205 INDIALANTIC, FL 32903	
VP GRETTA, CAROLINE 354 ALBEDO AVE SE PALM BAY, FL 32909	☐ Delete
T PELOSI, ELI 2053 REDWOOD CIRCLE NE PALM BAY, FL 32905	☐ Delete
RS URRETA, BARBARA 2400 CORAL RIDGE CIRCLE MELBOURNE, FL 32935	☐ Delete
CS CARDINAL, PIERRETTE 2816 SEBASTIAN LANE MELBOURNE, FL 32935	☐ Delete
 CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
PRESIDENT BRUNER ALFONSO 412 SCHOOL ROAD # 89 INDIAN HARBOUR BEACH, FL 32937	
 CITY-ST-ZIP	☐ Change ☐ Addition
 CITY-ST-ZIP	☐ Change ☐ Addition
 CITY-ST-ZIP	☐ Change ☐ Addition
 CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Alfonso Bruner SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 4/13/06 DAYTIME PHONE # 312-242-8044