

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728269

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** ITALIAN AMERICAN CLUB OF SOUTH BREVARD, INC.

**Current Principal Place of Business:**

1471 CYPRESS AVENUE  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

1471 CYPRESS AVENUE  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-3010458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CICCONI, FRANK J  
990 BADGER DR. NE  
PALM BAY, FL 32905 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  
Name: CICCONI, FRANK  
Address: 990 BADGER DR. NE  
City-St-Zip: PALM BAY, FL 32905

Title: VP  
Name: BARRONE, ANTHONY  
Address: 1726 GRAND ISLE  
City-St-Zip: MELBOURNE, FL 32940

Title: TRES  
Name: EDA, PEITHMAN  
Address: 512 EAST STRAWBRIDGE AVE  
City-St-Zip: MELBOURNE, FL 32901

Title: CS  
Name: BREE, CICCONI  
Address: 1325 KNOLWOOD DR N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: WAYS  
Name: MADDALENA, CRISCI  
Address: 1555 N HWY A1A #205  
City-St-Zip: INDIALANTIC, FL 32903

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: FRANK CICCONI

PRES

02/20/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date