

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 731449 (5)
1. Corporation Name
**THE ITALIAN-AMERICAN SOCIAL CLUB OF BEVERLY HILL
S, INC.**



Principal Place of Business
**ESTHER LATZ
33 S. COLUMBUS ST.
BEVERLY HILLS FL 34465
US**

Mailing Address
**ESTHER LATZ
33 S. COLUMBUS ST.
BEVERLY HILLS FL 34465
US**

3. Date Incorporated or Qualified
12/23/1974

3a. Date of Last Report
04/27/1995

2. Principal Place of Business 21 JOSEPH MINICHIELLO Suite, Apt., etc. 22 712 W. PEARSON ST., City & State 23 HERNANDO FL. Zip 24 34465	2a. Mailing Address 26 JOSEPH MINICHIELLO Suite, Apt., etc. 27 712 W. PEARSON ST., City & State 28 HERNANDO FL. Zip 29 34465	4. FEI Number 59-2887719	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
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**GLANSANTI, ALFRED A
229 S. DAVIS ST.
BEVERLY HILLS FL 34465**

10. Name and Address of New Registered Agent

81 Name
ANGELO S. GERACI

82 Street Address (P.O. Box Number is Not Acceptable)
316 S. TYLER ST.

83

84 City
BEVERLY HILLS FL 85 Zip Code
34465

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 **Angelo S. Geraci**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEB 6, 1996

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	LATZ, ESTHER ☒ DELETE	1.1 TITLE P	☒ Change ☐ Addition
NAME		1.2 NAME JOSEPH MINICHIELLO	
STREET ADDRESS	33 S. COLUMBUS ST.	1.3 STREET ADDRESS 712 W. PEARSON ST.,	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	1.4 CITY-ST-ZIP HERNANDO, FL. 34465	
TITLE VP	ANDREONE, JAMES ☒ DELETE	2.1 TITLE VP	☒ Change ☐ Addition
NAME		2.2 NAME GLORIA D'ANNUNZIO	
STREET ADDRESS	312 S. LINCOLN AVE.	2.3 STREET ADDRESS 105 S. MONROE ST.,	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	2.4 CITY-ST-ZIP BEVERLY HILLS, FL. 34465	
TITLE S	D'ANNUNZIO, GLORIA ☐ DELETE	3.1 TITLE S	☒ Change ☐ Addition
NAME		3.2 NAME GRACE CACIOPPO	
STREET ADDRESS	105 S. MONROE STREET	3.3 STREET ADDRESS 209 S. TYLER ST.,	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	3.4 CITY-ST-ZIP BEVERLY HILLS, FL. 34465	
TITLE T	GLANSANTI, ALFRED ☐ DELETE	4.1 TITLE T	☒ Change ☐ Addition
NAME		4.2 NAME ANGELO S. GERACI	
STREET ADDRESS	3090 CHICKASAW WAY	4.3 STREET ADDRESS 316 S. TYLER ST.	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	4.4 CITY-ST-ZIP BEVERLY HILLS, FL. 34465	
TITLE D	BARKER, JOSEPHINE ☒ DELETE	5.1 TITLE D	☒ Change ☐ Addition
NAME		5.2 NAME ALFRED GLANSANTI	
STREET ADDRESS	5250 N. BEDSTRAW BLVD.	5.3 STREET ADDRESS 229 S. DAVIS ST.,	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	5.4 CITY-ST-ZIP BEVERLY HILLS, FL. 34465	
TITLE D	NAPOLITANO, BEA ☒ DELETE	6.1 TITLE D	☒ Change ☒ Addition
NAME		6.2 NAME BEN PAOLILLO	
STREET ADDRESS	221 S. HARRISON CT.	6.3 STREET ADDRESS 502 S. BARBOUR ST.	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	6.4 CITY-ST-ZIP BEVERLY HILLS, FL. 34465	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Angelo S. Geraci** **ANGELO S. GERACI** 352-746-7522

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)