## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State 🥻

DIVISION OF CORPORATIONS

1999 DOCUMENT # 733569

1. Corporation Name
ORDER Sons of Italy in America
LAKE Worth-Boynton Beach Lodge N.O.
Principal Place of Edsiness

Mailing Address

3595 2nd AUEN.

2693 D East Burkley D. West Palm Beach, 1-1

## May 17, 1999 8:00 am Secretary of State

05-17-1999 90074 036 \*\*\*\*61.25

\* 5 555819 - 90074 - 36 9 \*

Principal Place of Business     2a. Mailing Address	3. Date Incorporated or Qualified
21 3575 In HUEN. 26 2693 () (	East Barkley 8/13/1975
Suite, Apt. #, etc. Suite, Apt. #, etc.	4. FEI Number Applied For
22 27	59-65/08 43 Not Applicable
City & State City & State	5. Certificate of Status Desired
23 28 West Plan	Lm. BEACH F4 Fee Required
Zip Country Zip	Country\$5.00 May Be-
24 25 29 33 473 3	Trust Fund Contribution Added to Fees
Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
J.P. MARINELLL	81 Name
1615 Forum Place	82 Street Address (P.O. Box Number is Not Acceptable)
Suite 5-5	83
David Cl	
West Palm Beach Fla3401 USA	9   84   City   FL   85   Zip Code
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: R	Registered Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE Pres DELETE	1.1 TITLE Pres. Change Addition
The same	12 NAME Paul Spera
STREET ADDRESS 3595 2nd. AUEN.	1.3 STREET ADDRESS
CITY-ST-ZIP L (U. FL. 3346)	1.4 CITY-ST-ZIP
TITLE RS/D Financial Sec DELETE	21 TIME 11.CG President Mchange Addition
NAME Mary JANE Aumais	22 NAME Mary Jane Addone
STREET ADDRESS 6 205 Balony Ct.	23 STREET ADDRESS 2693 D. East Burkley
CITY-ST-ZIP Bounton Bch 1= 2 33437	2.4 CITY-ST-ZIP West Palm Boh F1 33415
TITLE VICE Pres. ( DELETE	3.1 TITLE Sec Change Addition
NAME MARIA PRINCE	32 NAME Mary Jane Aumais.
STREET ADDRESS 2886 FERN Ley 1-6 ast #74	33 STREET ADDRESS 6205 PALMY BOSET.
CITY-ST-ZIP West Palm Beach PL 33415	34 CITY-ST-ZIP Rounton Beach PL 33437
TITLE TITAKUN XI/DELETE	4.1 TITLE Director Change Addition
NAME IZA MINISTERIOR.	4.2 NAME BUL MICELOHO
STREET ADDRESS 2886 FEOTILLED Dr. E #16	43 STREET ADDRESS 7334 ASh Ley Shores Circle
CITY ST-ZIP West Palm Beh FL 33415	44 CITY-ST-ZIP 1 ARE Worth, FL 33467
TITLE DELETE	5.1 TITLE Director Change Addition
NAME	52 NAME Philip Mancus i
STREET ADDRESS	53 STREET ADDRESS
CITY-ST-ZIP	54 CITY-ST-ZIP FLQ. GARDLOS PL 33467
TITLE DELETE	6.1 TITLE Director Change Addition
NAME	62 NAME S Line Managemen
STREET ADDRESS	63 STREET ADDRESS 2 724 N. Clarden HOE. 7/02
CITY-ST-ZIP	64 CITY-ST-ZIP LAKE Worth FL 33460
Add the second s	he exemption etated in Section 110.07(3)(i) Elevida Statutes I further certify that the information

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, with all other like empowered.

SIGNATURE: