


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90016 034 ****61.25

DOCUMENT # 733569 1. Entity Name ORDER SONS OF ITALY IN AMERICA, LAKE WORTH-BOYNTON BEACH LODGE NO. 2304, INC.					
Principal Place of Business 4725 LAKEWORTH RD LAKE WORTH, FL 33463			Mailing Address PETER MARCELLI 5730 FERNLEY DR E #28 WEST PALM BEACH, FL 33415 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-6510843					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent DEGANCE, ESQ, JOS 2471 NORTH FEDERAL HWY SUITE 601 FORT LAUDERDALE, FL 33306					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARCELLI, PETER <input type="checkbox"/> Delete 5730 FERNLEY DR E #28 WEST PALM BEACH, FL 33415				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BERENOTTO, ROY <input type="checkbox"/> Delete 2880 LAKE OSBORNE DR 208 LAKE WORTH, FL 33461				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICELOTTA, BOB <input type="checkbox"/> Delete 3266 JOG PARK DRIVE GREENACRES, FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS MELICE, FELICIA <input type="checkbox"/> Delete 500 DAVIS RD., BLDG. 1, APT. 37 PALM SPRINGS, FL 33461				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FST D'ATTOMA, CAROLYN <input type="checkbox"/> Delete 2029 PRAIRIE KEY RD WEST PALM BEACH, FL 33406				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERENOTTO, Roy <input type="checkbox"/> Change <input type="checkbox"/> Addition 2880 LAKE OSBORNE DR 208 LAKE WORTH, FL 33461				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FIORENZA, DORA <input type="checkbox"/> Change <input type="checkbox"/> Addition 7180 Lockwood Rd LAKE WORTH FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICELOTTA, Bob <input type="checkbox"/> Change <input type="checkbox"/> Addition 3266 JOG PARK DRIVE GREENACRES, FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS MELICE, Felicia <input type="checkbox"/> Change <input type="checkbox"/> Addition 500 DAVIS Rd., Bldg. 1, Apt 37 Palm Springs, FL 33461				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FST CANNUSCIO, GRAZIELLA <input type="checkbox"/> Change <input type="checkbox"/> Addition 5390 RIVERMILL LANE LAKE WORTH, FL 33463				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PITTARO, Sam <input type="checkbox"/> Change <input type="checkbox"/> Addition 2886 FERNLEY DR. EAST #80 WEST PALM BEACH, FL 33415				
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: <u>Graziella Cannuscio</u> <u>2-7-08 (561) 642-4836</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					