2002 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 21, 2002 8:00 am
Secretary of State
03-29-2002 91423 040 ****61.25

DOCUMENT # 734143

1. Entity Name

DOMINICK GENTILE ORDER SONS OF ITALY CORAL SPRIN GS LODGE #2332, INC.

Principal Place of Business	Mailing Address
5438 W 45TH WAY COCONUT CREEK FL 33073 US	5438 W 45TH WAY COCONUT CREEK FL 33073 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Above	Above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0308247 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~ESPOSITO, GREGORY F., JR., ESQ.~~ ~~4102 NW 78TH TERRACE~~ ~~CORAL SPRINGS FL 33065~~	Name: MARIE Sommovigo Street Address (P.O. Box Number is Not Acceptable): 8433 N.W. First St City: Coral Springs FL FL Zip Code 33071

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.

SIGNATURE Marie Sommovigo 3-18-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HARRINGTON, ANGELA (D) 5438 NW 15TH WAY COCONUT CREEK FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HARRINGTON, CHARLES 5438 NW 45 WAY COCONUT CREEK FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Carmela Stracuzzi, V.P (D) 7867 Golf Circle Dr. B212 Margate, Florida 33063 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARYLOU UTTARIELLO 8037 SANIBEL DRIVE TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Frances Przybylinski (T) Recording Secretary 8553 N.W. 24th Ct Coral Springs, FL 33063 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JOSEPHINE PRICE (T) 10440 NW 8TH CT CORAL SPRINGS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARCURIO, SALVATORE 8304 NW 35TH STREET CORAL SPRINGS FL 33065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MARIE C. Sommovigo (D) 8433 N.W. 1st St Coral Springs, FL 33071 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BRATTOLE, PHYLLIS (T) 5717 NW 74TH AVE TAMARAC FL 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

12. 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 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: Marie C. Sommovigo [illegible] Financial Secretary 954 752-5128
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Marie C. Sommovigo