

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735892

FILED
Jan 16, 2006
Secretary of State

Entity Name: ITALIAN CLUB OF TAMPA, INC.

Current Principal Place of Business:

1731 E. 7TH AVE.
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5054
TAMPA, FL 33605

New Mailing Address:

FEI Number: 59-1926144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENTLEY, MARK
201 N. FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602 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: PD () Delete
Name: GUAGLIARDO, SAL
Address: 5807 MARINER STREET
City-St-Zip: TAMPA, FL 33609

Title: VD () Delete
Name: CANNELLA-VANBELZEN, STEPHANIE
Address: 3504 CORONA STREET
City-St-Zip: TAMPA, FL 33629

Title: SD () Delete
Name: KOPELMAN, FELICIA
Address: 13901 MIDDLE PARK DRIVE
City-St-Zip: TAMPA, FL 33624

Title: TD () Delete
Name: ANTHONY, JAY
Address: 4202 S. DREXEL AVE.
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: FELICIA A. KOPELMAN

SD

01/16/2006

Electronic Signature of Signing Officer or Director

Date