2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2006
Secretary of State

DOCUMENT# 746748

Entity Name: JOSEPH FRANZALIA, LODGE NUMBER 2422 OF THE ORDERER, SONS OF ITALY IN AMERICA

Current Principal Place of Business:

SONS OF ITALY
808 SOUTH DRIVE
FORT WALTON BCH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

808 SOUTH DRIVE
FORT WALTON BCH, FL 32547 US

New Mailing Address:

FEI Number: 59-1910557 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZUPPA, WILLIAM E
3 CALLE RIO DRIVE
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

PRESIDENT, SONS OF ITALY
808 SOUTH DR
FT WALTON BCH, FL 32547 US

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: WILLIAM E. ZUPPA 01/07/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: GOTTSCHALK, EARL
Address: 261 SHALIMAR DRIVE
City-St-Zip: SHALIMAR, FL 32579

Title: ORAT ( ) Delete
Name: WALKER, WILLIAM
Address: 26 SIXTH STREET
City-St-Zip: SHALIMAR, FL 32579

Title: SECY ( ) Delete
Name: YANORA, JOHN
Address: 943 ASHLEY LANE UNIT # D
City-St-Zip: FT WALTON BEACH, FL 32547

Title: TREA ( ) Delete
Name: BOISJOLIE, RONALD
Address: 525 SHOAL RIVER DRIVE
City-St-Zip: CRESTVIEW, FL 32539

Title: FIN ( ) Delete
Name: HASSETT, RAE T
Address: 899 MASTERS BLVD
City-St-Zip: SHALIMAR, FL 32579

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:

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: WILLIAM E. ZUPPA PRES 01/07/2006
Electronic Signature of Signing Officer or Director Date