


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90047 024 ****70.00

DOCUMENT # 753068	
1. Entity Name ITALIAN-AMERICAN CLUB OF COCONUT CREEK, FL., INC	

Principal Place of Business 1501 CATHEDRAL DR. POMPANO BEACH FL 33063 US	Mailing Address 1501 CATHEDRAL DR. POMPANO BEACH FL 33063 US
---	---



2. Principal Place of Business 2802 Victoria Way Suite, Apt. #, etc. N2	3. Mailing Address 2802 Victoria Way Suite, Apt. #, etc. N2
--	--

1st MOORE CR2E037 (10/05)

City & State Coconut Creek, FL.	City & State Coconut Creek, FL.
Zip 33066	Country U.S.A.

4. FEI Number 59-2073824	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TIERNAN, PETER B ESQUIRE 6361 NW 16 ST. MARGATE FL 33063

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	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	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
<table border="1"> <tr> <td>TITLE</td> <td>P</td> <td><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MENDITTO, ANDREW</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1501 CATHEDRAL DR.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>POMPANO BEACH FL 33063</td> <td></td> </tr> </table>	TITLE	P	<input checked="" type="checkbox"/> Delete	NAME	MENDITTO, ANDREW		STREET ADDRESS	1501 CATHEDRAL DR.		CITY-ST-ZIP	POMPANO BEACH FL 33063		<table border="1"> <tr> <td>TITLE</td> <td>Pres.</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>MICHAEL VISCONTI</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2802 VICTORIA Way N2</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCONUT CREEK, FL. 33066</td> <td></td> </tr> </table>	TITLE	Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	MICHAEL VISCONTI		STREET ADDRESS	2802 VICTORIA Way N2		CITY-ST-ZIP	COCONUT CREEK, FL. 33066	
TITLE	P	<input checked="" type="checkbox"/> Delete																							
NAME	MENDITTO, ANDREW																								
STREET ADDRESS	1501 CATHEDRAL DR.																								
CITY-ST-ZIP	POMPANO BEACH FL 33063																								
TITLE	Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME	MICHAEL VISCONTI																								
STREET ADDRESS	2802 VICTORIA Way N2																								
CITY-ST-ZIP	COCONUT CREEK, FL. 33066																								
<table border="1"> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RANDO, ANNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8075 DOLOMITTIAN WAY</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOYNTON BEACH FL 33437</td> <td></td> </tr> </table>	TITLE		<input type="checkbox"/> Delete	NAME	RANDO, ANNE		STREET ADDRESS	8075 DOLOMITTIAN WAY		CITY-ST-ZIP	BOYNTON BEACH FL 33437		<table border="1"> <tr> <td>TITLE</td> <td>Treas.</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Rando, Anne</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3600 GAITHER OCEAN DR APT 7K</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT LAUDERDALE, FL 33308</td> <td></td> </tr> </table>	TITLE	Treas.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Rando, Anne		STREET ADDRESS	3600 GAITHER OCEAN DR APT 7K		CITY-ST-ZIP	FT LAUDERDALE, FL 33308	
TITLE		<input type="checkbox"/> Delete																							
NAME	RANDO, ANNE																								
STREET ADDRESS	8075 DOLOMITTIAN WAY																								
CITY-ST-ZIP	BOYNTON BEACH FL 33437																								
TITLE	Treas.	<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME	Rando, Anne																								
STREET ADDRESS	3600 GAITHER OCEAN DR APT 7K																								
CITY-ST-ZIP	FT LAUDERDALE, FL 33308																								
<table border="1"> <tr> <td>TITLE</td> <td>1VP</td> <td><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CONTINO, JOSEPH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2501 ANTIQUA ISLES BLVD.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOYNTON BEACH FL 33437</td> <td></td> </tr> </table>	TITLE	1VP	<input checked="" type="checkbox"/> Delete	NAME	CONTINO, JOSEPH		STREET ADDRESS	2501 ANTIQUA ISLES BLVD.		CITY-ST-ZIP	BOYNTON BEACH FL 33437		<table border="1"> <tr> <td>TITLE</td> <td>1 V.P.</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Landini, Anthony</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4400 Banyon Trail Dr.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCONUT CREEK, FL. 33073</td> <td></td> </tr> </table>	TITLE	1 V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Landini, Anthony		STREET ADDRESS	4400 Banyon Trail Dr.		CITY-ST-ZIP	COCONUT CREEK, FL. 33073	
TITLE	1VP	<input checked="" type="checkbox"/> Delete																							
NAME	CONTINO, JOSEPH																								
STREET ADDRESS	2501 ANTIQUA ISLES BLVD.																								
CITY-ST-ZIP	BOYNTON BEACH FL 33437																								
TITLE	1 V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME	Landini, Anthony																								
STREET ADDRESS	4400 Banyon Trail Dr.																								
CITY-ST-ZIP	COCONUT CREEK, FL. 33073																								
<table border="1"> <tr> <td>TITLE</td> <td>2VP</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CAMPAGNA, SAVATORE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5757 ROYAL ISLES BLVD.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOYNTON BEACH FL 33437</td> <td></td> </tr> </table>	TITLE	2VP	<input type="checkbox"/> Delete	NAME	CAMPAGNA, SAVATORE		STREET ADDRESS	5757 ROYAL ISLES BLVD.		CITY-ST-ZIP	BOYNTON BEACH FL 33437		<table border="1"> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	2VP	<input type="checkbox"/> Delete																							
NAME	CAMPAGNA, SAVATORE																								
STREET ADDRESS	5757 ROYAL ISLES BLVD.																								
CITY-ST-ZIP	BOYNTON BEACH FL 33437																								
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table border="1"> <tr> <td>TITLE</td> <td>S</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>YERARDI, MAGGIE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4737 NW 30TH ST</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCONUT CREEK FL 33066</td> <td></td> </tr> </table>	TITLE	S	<input type="checkbox"/> Delete	NAME	YERARDI, MAGGIE		STREET ADDRESS	4737 NW 30TH ST		CITY-ST-ZIP	COCONUT CREEK FL 33066		<table border="1"> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete																							
NAME	YERARDI, MAGGIE																								
STREET ADDRESS	4737 NW 30TH ST																								
CITY-ST-ZIP	COCONUT CREEK FL 33066																								
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table border="1"> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>	TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table border="1"> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Michael Visconti Feb. 7, 2006 954-973-4967