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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 29 PM 4:18

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Candice B. McHugh  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 756853 (8)  
MARGATE ITALIAN-AMERICAN CIVIC ASSOCIATION INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
% M. PLACIDO  
1694 NW 66 AVE 1195 NW 74 AVE  
MARGATE FL 33063 MARGATE FL 33063  
US US

3. Date Incorporated or Qualified 03/19/1981  
3a. Date of Last Report 02/25/1994  
4. FEI Number 59-2347405  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 6009 NW 10th 26 1195 NW 74 Ave  
22 State, Apt. #, etc. 27 Suite, Apt. #, etc.  
23 City & State 28 City & State  
MARGATE FLA MARGATE, FLA.  
24 Zip 25 Country 29 Zip 30 Country  
33063 Broward 33063 Broward

9. Name and Address of Current Registered Agent  
PLACIDO, MARY  
1694 NW 66 AVE  
MARGATE FL 33063

10. Name and Address of New Registered Agent  
81 Name MARY PLACIDO  
82 Street Address (P.O. Box Number is Not Acceptable) 1195 NW 74 AVE  
83  
84 City MARGATE FL 85 Zip Code 33063

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMENDOLA, THOMAS	1.2 NAME	
STREET ADDRESS	6832 NW 3RD ST	1.3 STREET ADDRESS	
CITY, ST, ZIP	MARGATE FL	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUFFARI, NAT	2.2 NAME	KAPLAN, CONNIE
STREET ADDRESS	2651 NW 61 AVE	2.3 STREET ADDRESS	430 E. LAKEWOOD CIRCLE
CITY, ST, ZIP	MARGATE FL	2.4 CITY - ST - ZIP	MARGATE FLA. 33063
TITLE	VD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KAPLAN, CONNIE	3.2 NAME	MICHAEL GERARDINE
STREET ADDRESS	430 E LAKEWOOD CIRCLE	3.3 STREET ADDRESS	354 CARAMBOLA CIRCLE
CITY, ST, ZIP	MARGATE FL	3.4 CITY - ST - ZIP	COCONUT CREEK, FLA. 33066
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUPPARI, ANN	4.2 NAME	
STREET ADDRESS	2651 NW 61 AVE	4.3 STREET ADDRESS	
CITY, ST, ZIP	MARGATE FL	4.4 CITY - ST - ZIP	
TITLE	TD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLACIDO, MARY	5.2 NAME	PLACIDO, MARY
STREET ADDRESS	1694 NW 66 AVE.	5.3 STREET ADDRESS	1195 NW 74 AVE
CITY, ST, ZIP	MARGATE FL	5.4 CITY - ST - ZIP	MARGATE FLA 33063
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MISITI, ANTHONY	6.2 NAME	
STREET ADDRESS	5510 LAKESIDE DR	6.3 STREET ADDRESS	
CITY, ST, ZIP	MARGATE FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.037(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and I make no other representations. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Placido 2-22-95 1-305 979-1694  
DATE: \_\_\_\_\_