## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 16, 2007 8:00 am Secretary of State 01-16-2007 90220 043 \*\*\*\*61.25

Daytime Phone #

## **DOCUMENT #759404**

1. Entity Name LA NOUVA SICILIA UNITA LODGE #1251, ORDER SONS OF ITALY OF AMERICA, INC.



Principal Place of Business 3315 W LEMON ST

Mailing Address 3315 W. LEMON ST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TAMPA, FL 33609 TAMPA, FL 33609										•			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address					######################################	E	III UIIEKI i	(Ci) (Lia)) (II)	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01052007	Chg-NP	CR	2E037	(12/06)	
City & State			Cit	City & State				4. FEI Number Applied For 59-3080746 Not Applicable					
Zip Country			Zip	Zip Co:			5. Certificate of Status Desired \$8.75 Additional Fee Required						
6. Name and Address of Current Registered Agent								7. Name and	Address of N	ew Registe	red Ag	ent	
CAPORICE, NELSON 1506 E MARTIN L. KING BLVD. TAMPA, FL 33610						Name Street Address (P.O. Box Number is Not Acceptable)							
							·			<u> </u>	FL	Zip Code	8
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													<del></del>
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Can Trust Fund C	-		\$5.00 May Be Added to Fees  Make check payable Florida Department of						
10. OFFICERS AND DIRECTOR						,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10						
TITLE NAME STREET ADDRESS CITY-SI-ZIP		ANO, FRANK ST NASSAU STREET EL 33607		☐ Delete							(	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUESCA,	ANTONIO OODLYNNE AVE		☐ Delete							[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS FRISCO, DARLENE 6918 N GUN LOCK AVE. TAMPA, FL 33614			<b>IX</b> Delete		ET ADDRESS ST-ZIP	RS A P	SPOTO, GEORGINA R. 4718 MICHAEL COURT #11 47AMPA, FL., 33614					Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS SPOTO, GEORGINA R 4718 MICHAEL COURT #113 TAMPA, FL 33614			K Doelete	ET ADORESS ST-ZIP	FS Y( T)	YOLANDA MENENDEZ 918 WEST CIMMERON DR TAMPA, FL., 33603-1738					☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FAVATA, 3315 W LI TAMPA, F	EMON ST.		☐ Delete				, .			[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T LAKE AVE		☐ Delete							[	Change	☐ Addition
indicated of the cor	CITY-S1-ZIP  12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.												