## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

**DOCUMENT #**1. Corporation Name

(6)

ITALIAN-AMERICAN CIVIC LEAGUE OF BROWARD COUNTY,

**FILED** May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									ı kanıyı redio divu dibin tidir divik dalı dibil dibil dibil dibil dibil dibil					
700 SOUTH DIXIE HIGHWAY HOLLYWOOD FL 33020				700 SOUTH DIXIE HIGHWAY HOLLYWOOD FL 33020					3. Date Incorporated or Qualified 07/22/1982					
									4. FEI Number				Applied For	
2. Principal Place of Business 24. Mailing Address									59-065	5470	· · · · · ·		Not Applicable	
21		ness	26 Mai	2a. Mailing Address 26					5. Certificate o	f Status Desired	M		5 Additional Required	
Suite, Apt.	#, etc.		<del> </del>	Suite, Apt. #, etc.					Election Campaign Financing \$5.00 May Be					
22			27						Trust Fund Contribution					
City & Stat	e		<u> </u>	City & State					7. Is this nonprofit corporation a homeowners association?  Yes No					
Zip	Country			Zip Country				+-						
24		25 29			30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No					
9. Name and Address of Curren			ent Registered	1=0				. 1	10. Name and Address of New Registered Agent					
						81	Name	ı		:				
RENALD	O, PAUL					82 Street Addre			ess (P.O. Box Number is Not Acceptable)					
	JTH DIXIE I													
HOLLYW	/OOD FL 3	3020				83				ļ				
						84	City					85 Zi	p Code	
44 5	4- 45 1-					Ш	•			·	FL	_	•	
office or r	to the provis egistere#eg	lons of Sections 617.0 ent, or both, in the Sta th, and secept the ob	502 and 617.15 ale of Florida. S	508, Florida Statut luch change was	tes, the a authorize	bove d by	-named the con	corporal poration's	tion submits this s board of direc	s statement for the stors. I hereby acc	purpose o	f changing pointment i	its registered	
agent. I a			ligations of Sec	ction 617.0503) FI	orida Sta	tutes		7			3/	100	20.000.00	
SIGNATURE .	JOHL	of printed name of registered	formal and the same	MAV			DAL		nen reinstaling)	·	UATE	1798		
12.	eignature, typec		ND DIRECTOR		13.	A Age	nt signature	e required wi		HANGES TO OFF	Dille	DIRECTO	ORS IN 12	
TITLE	Ť				1.1 TITLE		V.		TOTAL COLOR	OLI IO 7 II II	Change			
NAME	CURCURATO, GEORGE				1.2 NAV			Joseph Pac		ė		•		
STREET ADDRESS	251 BRL	ARWOOD CIRCLE		1.3 \$1			ADDRESS			rson St./#	98			
CITY-ST-ZIP	HOLLYWOOD FL 33024				1.4 CIT			ſ		F1 33021				
TITLE	P			DELETE	2.1 %	TLE			d V.P.			Change	a Addition	
NAME	RENALDO, PAUL			2.2 N/				1	Michael Mele					
STREET ADDRESS	6601 EV	ergreen dr.		2.3 S		3 STREET ADDRESS 3			309 N 31st Ave.					
CITY-ST-ZW	MIRAMA	R FL				4 CITY-ST-ZIP				Fl 33021				
TITLE	SD			☐ DELETE 3			3.1 TITLE					Change	Addition	
NAME		I, C. TINA		3.2			3.2 NAME		Anthony Iovino					
STREET ADDRESS		6 AVENUE		3					25 Linco					
CITY-ST-ZW	HALLAN	DALE FL					CITY-ST-ZIP			F1 33021				
TITLE	2VD	141.050		DELETE	4.1 Ti			]	,			☐ Change	Addition	
NAME	SACCE,				4.2 %		i	Ī		1			1	
STREET ADDRESS	1434 MA						address							
CITY-ST-ZIP TITLE	D D	OOD FL 33020		DELETE		TY-\$1	- ZIP					1 0	Autota	
NAME	BAGIOTI	n ALDO		C DETCIE	5.1 TI					•		☐ Change	Addition	
STREET ADDRESS	4318 GR	•			5.2 N		ADDRESS			•				
City-St-zip		OOD FL 33021				INCE 17				•				
TITLE	D			DELETE	6.1 TI		- 411	<del> </del>		<del></del>		☐ Change	Addition	
NAME		, JOSEPH			6.2 N									
STREET ADDRESS		EVELAND ST.					ADDRESS :							
CITY-ST-ZIP		OOD FL 33020				TY-ST	1							
		Information supplied	with this filing (	does not qualify for				d in Sect	tion 119.07(3)(i)	. Florida Statutes	I further ce	rtify that th	ne information	

indicated on this annual report or supplied with this initing does not quarry for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver or bustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed to on an attachment with an address.