2002 UNIFORM BUSINESS REPORT (UBR)

May 30, 2002 8:00 am Secretary of State DOCUMENT # **764260** 1. Entity Name 04-30-2002 90175 045 ****61.25 ITALIAN-AMERICAN CIVIC LEAGUE OF BROWARD COUNTY. INC. Principal Place of Business Mailing Address 700 SOUTH DIXIE HIGHWAY 700 SOUTH DIXIE HIGHWAY HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 59-0655470 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GAGIOTTI IOVINO, ANTHONY 700 SOUTH DIXIE HIGHWAY HOLLYWOOD FL 33020 City Zip Code 7430 2.. 04 AO GW N 9. 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NÖW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SWEETEN, JULIE NAME ð STREET ADDRESS 1049 WASHINGTON ST STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP HOLLYWOOD FL 33019 BYP TITLE ☐ Delete TITLE Change ■ Addition NAME CUCINOTTA, SONIA NAME STREET ADDRESS 12526 SW 9TH PL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33325 Detete TITLE 1 TITLE CHEMMEN OF THE BOARD ☐ Change Addition NAME IOVINO, ANTHONY NAME ANTHONY IOVINO STREET ADDRESS 5025 LINCOLN ST STREET ADDRESS 5025 LINCOLN ST CITY-ST-ZIF CITY-ST-ZIP HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 TITLE Delete TITLE ☐ Change ■ Addition BAGIOTTI, ALDO NAME NAME STREET ADDRESS 4318 GRANT ST. STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 City-ST-ZIP TITLE T ☐ Delete TITLE ☐ Change ☐ Addition NAME WOLTER, TINA NAME STREET ADDRES 601 SW 6 AVE STREET ADDRESS CITY-ST-71P HALLANDALE FL 33009 CITY-ST-ZIP TITLE **₽**vP ☐ Delete ☐ Change ☐ Addition CHIOFOLO, RALPH NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

5100 WASHINGTON ST

HOLLYWOOD FL 33021

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #

FILED