2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State
02-01-2001 90150 048 ****61.25

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DOCUMENT # 768222

1. Entity Name

SONS OF ITALY, MIKE ACCARDI LODGE, INC.

Principal Place of Business	Mailing Address
1270 DOYLE RD DELTONA FL 32725	~~P.O. BOX 5754,~~ 1270 DOYLE RD. DELTONA FL 32725-~~5754~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1270 DOYLE ROAD Suite, Apt. #, etc.	1270 DOYLE ROAD Suite, Apt. #, etc.
City & State: DELTONA FL	City & State: DELTONA FL
Zip: 32725 Country: VOLUSIA	Zip: 32725 Country: VOLUSIA

4. FEI Number 59-2897941 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
OLIVIERI, JOSEPH 2462 KIMBERLY DR DELTONA FL 32738	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.

SIGNATURE JOSEPH OLIVIERI, PRESIDENT Joseph Olivieri Pres. 1/24/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD OLIVIERI, JOSEPH 2462 KIMBERLY DRIVE DELTONA FL 32738	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PALMISANO, CHARLES 1564 SUNBIRD TERR DELTONA FL 32725	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD OLIVIERI, JOSEPH 2462 KINBERLY DR DELTONA FL 32738	☒ Delete	ORATOR / DIRECTOR SAMUEL BARONE 2901 KEESLER ST DELTONA, FL 32738	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BRANCIFORTE, THERESA 784 LAKE COMO DR LAKE MARY FL 32746	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FSD MELITO, JOHN 1457 SAXON BLVD DELTONA FL 32725	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCAFIDDI, ELINORE 1751 PHILADELPHIA CT DELTONA FL 32752	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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 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: Joseph Olivieri Pres. 1/24/2001 (904) 789-2316
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOSEPH OLIVIERI PRES. Date Daytime Phone #