

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770130

FILED  
Jan 15, 2009  
Secretary of State

**Entity Name:** ORDER SONS OF ITALY IN AMERICA CHARLES J. BONAPARTE LODGE #2504, INC.

**Current Principal Place of Business:**

728 S.W. 44TH STREET  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

728 S.W. 44TH STREET  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 59-2784718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BIONDI, LINDA  
728 S.W. 44TH STREET  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: COSSENTINO, SALVATORE  
Address: 12590 APOPKA COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP ( ) Delete  
Name: BIONDI, LINDA  
Address: 728 S.E. 44TH STREET  
City-St-Zip: CAPE CORAL, FL 33904

Title: S ( ) Delete  
Name: BAYUK, JOYCE  
Address: 19868 CYPRESS WOOD COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T ( ) Delete  
Name: CIULLA, VIVIAN  
Address: 1424 SE 33RD ST  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: COSSENTINO, SALVATORE J  
Address: 12590 APOPKA COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE COSSENTINO

P

01/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date