

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90013 010 ****61.25

DOCUMENT # N01000001151

1. Entity Name

**FRIENDSHIP LODGE OSIA SONS OF ITALY LODGE
#2728 INC.**



Principal Place of Business

**PO BOX 3704
SPRING HILL FL 34606**

Mailing Address

**PO BOX 3704
SPRING HILL FL 34606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

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

**LEMMO, JOSEPH
5175 HAMLET CIRCLE
SPRING HILL FL 34606**

Name

MELUCCI, DOREEN

Street Address (P.O. Box Number is Not Acceptable)

1413 MEADOW LARK RD.

City

SPRING HILL

FL

Zip Code

34608

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

Doreen H. Melucci

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/04

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LEMMO, JOSEPH	
STREET ADDRESS	PO BOX 3704	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	RANAUDO, BEATRICE	
STREET ADDRESS	PO BOX 3704	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	CUTILLO, ANNA	
STREET ADDRESS	P.O. BOX 3704	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MACCHIA, ANGELO	
STREET ADDRESS	P.O. BOX 3704	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	LOIACONO, DOLORES	
STREET ADDRESS	P.O. BOX 3704	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MELUCCI, DOREEN	
STREET ADDRESS	1413 MEADOW LARK RD	
CITY-ST-ZIP	SPRING HILL, FL 34608	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUTILLO, FRANK	
STREET ADDRESS	9515 VANCOUVER RD	
CITY-ST-ZIP	SPRING HILL, FL 34608	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLACONA, ANNE	
STREET ADDRESS	15428 ATWATER DR.	
CITY-ST-ZIP	SPRING HILL, FL 34604	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACCHIA, ANGELO	
STREET ADDRESS	1304 MASADA LN.	
CITY-ST-ZIP	SPRING HILL, FL 34608	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUONAGURIO, MARIE	
STREET ADDRESS	13205 CROWELL RD	
CITY-ST-ZIP	BROOKS VILLE, FL 34613	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Doreen H. Melucci

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/04

Date

Daytime Phone #