

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002456

FILED
Apr 21, 2009
Secretary of State

Entity Name: ITALIAN AMERICAN CLUB OF NORTH LAUDERDALE, INC.

Current Principal Place of Business:

8062 WEST MCNAB ROAD
POMPANO BEACH, FL 33068

New Principal Place of Business:

Current Mailing Address:

8062 WEST MCNAB ROAD
POMPANO BEACH, FL 33068

New Mailing Address:

FEI Number: 13-4212310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELA, ANGELO
370 NW 76 AVENUE
BUILDING 15 #203
MARGATE, FL 33063 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: VP () Delete
Name: MELA, ANGELO
Address: 370 NW 76 AVE, BLDG 15 #203
City-St-Zip: MARGATE, FL 33063

Title: D (X) Delete
Name: SANTARELLI, LOUIS
Address: 5102 NW 53RD ST
City-St-Zip: TAMARAC, FL 33319

Title: P () Delete
Name: MARROW, JOSEPH
Address: 58 GREENS ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D (X) Delete
Name: SEMENZA, SAM
Address: 2901 FIORI WAY
City-St-Zip: DELRAY BEACH, FL 33445

Title: D (X) Delete
Name: SANTORE, JOHN
Address: 10120 SW 48TH PLACE
City-St-Zip: COOPER CITY, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MELA, ANGELO
Address: 370 NW 76 AVE, BLDG 15 #203
City-St-Zip: MARGATE, FL 33063

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

Title: VP (X) Change () Addition
Name: MARROW, JOSEPH
Address: 58 GREENS ROAD
City-St-Zip: HOLLYWOOD, FL 33021

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: ANGELO MELA

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date