2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000002456

TI FILED

Aug 28, 2009

Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

8062 WEST MCNAB ROAD POMPANO BEACH, FL 33068

Current Mailing Address: New Mailing Address:

8062 WEST MCNAB ROAD POMPANO BEACH, FL 33068

FEI Number: 13-4212310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MELA, ANGELO 370 NW 76 AVENUE BUILDING 15 #203 MARGATE, FL 33063 US

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:

Name:

- Flaterin Circular of Decides at Asset

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete

PRES

Title: PD (X) Change () Addition

MELA, ANGELO Name: MELA, ANGELO

Address: 370 NW 76 AVE, BLDG 15 #203 Address: 370 NW 76 AVE, BLDG 15 #203

City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063

Title: VP () Delete Title: VPD (X) Change () Addition

 Name:
 MARROW, JOSEPH
 Name:
 FALCONE, ANTHONY

 Address:
 58 GREENS ROAD
 Address:
 480 NW 76 AVE APT 301 BLD 1

Address. 30 GREENS ROAD AUGUSS. 400 NW 70 AVE AFT 301 BLD

City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: MARGATE, FL 33063

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 PAOERCIO, CINDY

 Address:
 Address:
 7266 PAPAY WAY

 City-St-Zip:
 City-St-Zip:
 TAMARAC, FL 33321

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 08/28/2009