

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003399

FILED
Apr 29, 2007
Secretary of State

Entity Name: ORDER SONS OF ITALY IN AMERICA CELEBRATION LODGE # 2777, INC.

Current Principal Place of Business:

C/O JAMES MANTLA
1023 BANKS ROSE
CELEBRATION, FL 34747

New Principal Place of Business:

C/O ANDREW LA ROSA
801 OAK SHADOWS RD
CELEBRATION, FL 34747

Current Mailing Address:

C/O JAMES MANTLA
1023 BANKS ROSE
CELEBRATION, FL 34747

New Mailing Address:

C/O ANDREW LA ROSA
801 OAK SHADOWS RD
CELEBRATION, FL 34747

FEI Number: 04-3657995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABER, LAWRENCE H
715 BLOOM ST
STE 200A
CELEBRATION, FL 34747 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: D () Delete
Name: BUONCERVELLO, B SONNY
Address: 215 CELEBRATION PLACE # 190
City-St-Zip: CELEBRATION, FL 34747

Title: T () Delete
Name: GEROUX, SANDY
Address: 3760 MANTES CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: MANTIA, JAMES
Address: 1023 BANKS ROSE
City-St-Zip: CELEBRATION, FL 34747

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: PRES () Change (X) Addition
Name: LA ROSA, ANDREW
Address: 801 OAK SHADOWS RD
City-St-Zip: CELEBRATION, FL 34747

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: ANDREW LA ROSA

PRES

04/29/2007

Electronic Signature of Signing Officer or Director

_____ Date