

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003095

FILED
Mar 24, 2009
Secretary of State

Entity Name: BROWARD COUNCIL OF ITALIAN AMERICAN CLUBS, INC.

Current Principal Place of Business:

232 OCEANIC AVE
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

232 OCEANIC AVE
LAUDERDALE BY THE SEA, FL 33308

New Mailing Address:

FEI Number: 36-4564122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTINO, JOSEPH
2501 ANTIGUA TERRACE APT O-2
COCONUT CREEK, FL 33066 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: DIR () Delete
Name: PETRECCIA, RITA
Address: 232 OCEANIC AVE
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: PD () Delete
Name: CONTINO, JOSEPH
Address: 2501 ANTIGUA TERRACE APT O-2
City-St-Zip: COCONUT CREEK, FL 33066

Title: RSD () Delete
Name: GIANNETTINO, IDA
Address: 3300 N. STATE ROAD 7, B-187
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD () Delete
Name: HARRINGTON, ANGELA
Address: 5428 N.W. 45TH WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD () Delete
Name: MENDITTO, ANDREW
Address: 1501 CATHEDRAL DR.
City-St-Zip: MARGATE, FL 33063

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

Title: VPD (X) Change () Addition
Name: MARINO, GLADYS
Address: 3300 N. S.R.7, B-193
City-St-Zip: HOLLYWOOD, FL 33021

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: RITA PETRECCIA

DIR

03/24/2009

Electronic Signature of Signing Officer or Director

Date