2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# N04000006043

Entity Name: OSIA IL FIORE D'ITALIA #2811, INC

Current Principal Place of Business:

PO BOX 171
PORT RICHEY, FL 34673

New Principal Place of Business:

7419 MAHAFFEY DRIVE
NEW PORT RICHEY, FL 34653

Current Mailing Address:

PO BOX 171
PORT RICHEY, FL 34673

New Mailing Address:

FEI Number: 55-0869734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDREANO, JOSEPH J
724 GREEN RD
NEW SMYRNA BEACH, FL 32168 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: P ( ) Delete
Name: CIRILLO, NICHOLAS
Address: 7419 MAHAFFEY DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: V ( ) Delete
Name: IZZO, RALPH
Address: 3211 STONY BRIDGE DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T ( ) Delete
Name: BALANCIA, VICTOR
Address: 13919 TALMAGE LOOP
City-St-Zip: HUDSON, FL 34667

Title: SR ( ) Delete
Name: SORCHY, PAUL
Address: 9004 LI DO LN
City-St-Zip: PORT RICHEY, FL 34668

Title: SF ( ) Delete
Name: APOLLO, MARY ANN
Address: 9750 RAINELLE LN
City-St-Zip: PORT RICHEY, FL 34668

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: ( ) 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: MARY ANN APOLLO SF 03/01/2009
Electronic Signature of Signing Officer or Director — Date