## 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000008915

FILED Apr 18, 2012 Secretary of State

Entity Name: AMERICAN ITALIAN ASSOCIATION, INC.

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

231 HUBBELL STREET 3039 PINE TREE DR EDGEWATER, FK 32132 EDGEWATER, FL 32141

Current Mailing Address: New Mailing Address:

231 HUBBELL STREET 3039 PINE TREE DR EDGEWATER, FK 32132 EDGEWATER, FL 32141

FEI Number: 80-0121630 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:

SABBATINI, RAY
ANDREANO, JOSEPH
122 GREEN FOREST DR
724 GREEN RD

ORMOND BEACH, FL 32127 US NEW SMYRNA BEACH, FL 32168 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: JOSEPH ANDREANO 04/18/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: SCOGNO, ANTHONY
Address: 3039 PINE TREE DR
City-St-Zip: EDGEWATER, FL 32141

Title: VPD

Name: MASTROGIACOMO, JOAN Address: 331 MARINERS GATE DR City-St-Zip: EDGEWATER, FL 32141

Title: TD

Name: CHIARELLO, REBA
Address: 231 HUBBELL ST
City-St-Zip: EDGEWATER, FL 32132

Title: SD

Name: SCOGNO, BRENDA Address: 3039 PINE TREE DR City-St-Zip: EDGEWATER, FL 32141

Title: FSD Name: MICELI, ANN

Address: 5486 ST. REGIS WAY
City-St-Zip: PORT ORANGE, FL 32128

I hereby 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 all other like empowered.

SIGNATURE: BRENDA SCOGNO SD 04/18/2012