2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005437

FILED Apr 09, 2007 Secretary of State

Entity Name: NAPLES ITALIAN AMERICAN CLUB FOUNDATION, INC

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

7035 AIRPORT RD N NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

7035 AIRPORT RD N NAPLES, FL 34109

FEI Number: 20-5045417 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US MORANI, RENALD P 13100 HAMILTON HARBOUR DR NAPLES, FL 34110 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: RENALD P MORANI 04/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: DIR (X) Change () Addition Name: MORANI, RENALD Name: MORANI, RENALD

 Name
 Morkani, Renalb

 Address:
 7035 AIRPORT RD N

 City-St-Zip:
 NAPLES, FL 34109

 City-St-Zip:
 NAPLES, FL 34109

Title: SD () Delete Title: () Change () Addition Name: INCANTALUPO, ANTHONY Name:

 Name:
 INCANTALUPO, ANTHONY
 Name:

 Address:
 7035 AIRPORT RD N
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:

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

 Name:
 CATTA, RAY
 Name:
 LE CATTA, RAYMOND

 Address:
 7035 AIRPORT RD N
 Address:
 7035 AIRPORT RD N

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:
 NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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: RENALD P MORANI DIR 04/09/2007