## 2008 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## DOCUMENT # N06000009908

1. Entity Name PALM BAY ITALIAN-AMERICAN SOCIETY, INC.



**FILED** Jan 14, 2008 8:00 am **Secretary of State** 

01-14-2008 90095 012 \*\*\*\*61.25

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Principal Place of Business 699 ALFORD ST S.E. PALM BAY, FL 32909		Mailing Address P.O. BOX 100416 PALM BAY, FL 32910				
2 Principal Pla	ace of Business - No P.O. Box #	3. Mailing Address				
2. Finicipal Flace of business - No F.O. box #		S. Walling Address		) 1000H1801 OH OOHS	n Priet Maint Cath antie Maint State tailb	initi seint initini si tani
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082008 C	hg-NP CR2E037	(12/06)
City & State		City & State		4. FEI Number 76-083420	05	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of S	tatus Desired	8.75 Additional se Required
	6. Name and Address of Curren	t Registered Agent		7. Name and Add	dress of New Registered Ag	ent
CICCONE, FRANK			Name BURNS, JAMES  Street Address (P.O. Box Number is Not Acceptable)			
990 BADGER DR NE   PALM BAY, FL 32905				·		<del></del>
				9 ALFORD	ST, SE	
	•		CirpAL	m BAY	FL	Zip Code 32909
	named entity submits this statement fons of registered agent.	for the purpose of changing its	registered office or	registered agent, or both, in	the State of Florida. I am far	miliar with, and accept
the congan	7 G	3 1	1		<b>T</b>	
SIGNATURE _	James 6.	1 Suns	P		January 8	, 2008
,	Inature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	: Registered Agent signatur	re required when reinstating)	DATE	
	Filing Fee is \$61.25 9. Election Camp. Due by May 1, 2008 7rust Fund Cor				· · · · · · · · · · · · · · · · · · ·	
	_			\$5.00 May Be Added to Fees	Make check p Florida Departm	•
10.	Due by May 1, 2008 OFFICERS AND D	Trust Fund Co		Added to Fees	1	nent of State
10. TITLE	Due by May 1, 2008  OFFICERS AND D	Trust Fund Co	ontribution.	Added to Fees  ADDITIONS/CHANG	Florida Departm	CTORS IN 10
10. TITLE NAME	Due by May 1, 2008 OFFICERS AND D	Trust Fund Co	ontribution.	Added to Fees  ADDITIONS/CHANG	Florida Departm	CTORS IN 10
10. TITLE NAME STREET ADDRESS	Due by May 1, 2008  OFFICERS AND D  P CICCONE, FRANK	Trust Fund Co	ontribution.	Added to Fees  ADDITIONS/CHANG	Florida Departm	CTORS IN 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2008  OFFICERS AND D  P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905  V	Trust Fund Co	Ontribution.  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANG  BURNS JA  699 ALFORD  PALM BAY,	Florida Department of the Str. SE 74., 32909	CTORS IN 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905 V BURNS, JAMES	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Added to Fees  ADDITIONS/CHANG  BURNS JA  LAG ALFORD  PALM BAY,  MONTELBONE	Florida Departir  SES TO OFFICERS AND DIRE  TIMES  ST. SE  7L. 32909  MICHAEL	CTORS IN 10  Change Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008  OFFICERS AND D  P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905  V	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANG  BURNS JA  LAG ALFORD  PALM BAY,  MONTELRONE  2024 PALM	Florida Departments FINES FINES FILL, 32909 FILLAGE	CTORS IN 10  Change Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905 V BURNS, JAMES 699 ALFORD ST. SE PALM BAY, FL 32909 T	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADORESS CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANG  BURNS TH  LAG ALFORD  PALM BAY,  MONTELEONE  2024 PALM  PALM BAY,  PALM BAY,  PALM BAY,  PALM BAY,  PALM BAY,	Florida Departir  SES TO OFFICERS AND DIRE  TIMES  ST. SE  7L., 32909  , MICHAEL  L., 32905	CTORS IN 10  Change Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905 V BURNS, JAMES 699 ALFORD ST. SE PALM BAY, FL 32909 T HEAP, MARY	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME NAME NAME	Added to Fees  ADDITIONS/CHANG  BURNS JA  LAG ALFORD  PALM BAY,  MONTELRONE  2024 PALM  PALM BAY,  Thinicuci, J	Florida Departures SES TO OFFICERS AND DIRE ST. SE 7L. 32909  I, MICHAEL L. 32905  To sephine	CTORS IN 10 Change Addition  Change Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P CICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905 V BURNS, JAMES 699 ALFORD ST. SE PALM BAY, FL 32909 T	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANG  BURNS JA  LAG ALFORD  PALM BAY,  MONTELEONE  2024 PALM  PALM BAY,  Thinicuci,  RO, BOX 1003  PALM BAY,  PALM BAY,  THE BOX 1003	Florida Departures SES TO OFFICERS AND DIRES  ST. SE  TL. 32909  I, MICLARE  PLACE  L. 32905  FOSEPHINE  212  FL. 32910	CTORS IN 10 Change Addition  Change Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PCICCONE, FRANK 990 BADGER DR NE PALM BAY, FL 32905 V BURNS, JAMES 699 ALFORD ST. SE PALM BAY, FL 32909 T HEAP, MARY 945 LYONS CIRCLE NW PALM BAY, FL 32907 S	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANG  BURNS JA  LAG ALFORD  PALM BAY,  MONTELEONE  2024 PALM  PALM BAY,  Thinicuci,  RO, BOX 1003  PALM BAY,  PALM BAY,  THE BOX 1003	Florida Departures SES TO OFFICERS AND DIRES  ST. SE  TL. 32909  I, MICLARE  PLACE  L. 32905  FOSEPHINE  212  FL. 32910	CTORS IN 10 Change Addition  Change Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

James E. Burs

January 8, 2008

1-321-768-8083