

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07956

FILED
Jan 17, 2009
Secretary of State

Entity Name: ITALIAN AMERICAN WAR VETERANS OF THE UNITED STATES, INC. POST 4 ORLANDO, FLORIDA

Current Principal Place of Business:

ITALIAN AMERICAN SOCIAL CLUB
5900 HIBISCUS RD
ORLANDO, FL 328574111 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 570876
ORLANDO, FL 328570876 US

New Mailing Address:

FEI Number: 59-2597227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BADOLATO, GENE
1694 WINGSPAN WAY
WINTER SPRINGS, FL 32708 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: CD () Delete
Name: PROPP, DANIEL S
Address: 303 BRILEY AVE
City-St-Zip: OAKLAND, FL 34760 US

Title: SVCD () Delete
Name: DIMARINO, ANTHONY
Address: 2543 DOUBLE TREE PLACE
City-St-Zip: OVIEDO, FL 32766 US

Title: TD () Delete
Name: BADOLATO, EUGENE
Address: 1694 WINGSPAN WAY
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: AD () Delete
Name: BREEZE, CHRIS
Address: 506 DIVINE CIRCLE
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: BOWDEN, WILLIAM J
Address: 4515 JAMERSON PLACE
City-St-Zip: ORLANDO, FL 32807 US

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: EUGENE BADOLATO

TD

01/17/2009

Electronic Signature of Signing Officer or Director

Date