

2009 CORPORATION ANNUAL REPORT

DOCUMENT#N09000002104

FILED
Jan 21, 2009
Secretary of State**Entity Name:** KREWE OF ITALIA, INC.**Current Principal Place of Business:**1731 E 7TH AVE
TAMPA, FL 33605**New Principal Place of Business:****Current Mailing Address:**P O BOX 5054
TAMPA, FL 33675**New Mailing Address:****FEI Number:** 20-2551676**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BENTLEY, MARK
201 N FRANKLIN STREET SUITE 2200
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**BENTLEY, MARK
201 N FRANKLIN STREET SUITE 1650
TAMPA, FL 33602 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()**OFFICERS AND DIRECTORS:**

Title: P () Delete
Name: GRANELL, JAMIE
Address: 6912 CONATY ROAD
City-St-Zip: TAMPA, FL 33634

Title: VP () Delete
Name: BODIE, DON
Address: 2906 WINDING TRAIL DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: GRANELL, JAMIE
Address: 6912 CONATY ROAD
City-St-Zip: TAMPA, FL 33634

Title: S () Delete
Name: CARAVELLA, GIANNA T
Address: 834 E RIVER DRIVE
City-St-Zip: TAMPA, FL 33617

Title: T (X) Delete
Name: GERVAIS, HOPE
Address: 1715 W ELDRED DR
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BODIE, DON
Address: 2906 WINDING TRAIL DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP (X) Change () Addition
Name: PUPELLO, FRANK
Address: 10052 N. 52ND ST.
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: S (X) Change () Addition
Name: CARAVELLA, GIANNA T
Address: 834 E RIVER DRIVE
City-St-Zip: TAMPA, FL 33617

Title: T (X) Change () Addition
Name: GERVAIS, HOPE
Address: 1715 W ELDRED DR
City-St-Zip: TAMPA, FL 33603

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON BODIE

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date