

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20305

FILED
Apr 25, 2011
Secretary of State

Entity Name: ITALIAN AMERICAN WOMEN'S CLUB OF BROWARD COUNTY, INC.

Current Principal Place of Business:

C/O SHIRLEY CASEY
2300 S.W. 112TH AVENUE
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

C/O SHIRLEY CASEY
2300 S.W. 112TH AVENUE
DAVIE, FL 33325

New Mailing Address:

FEI Number: 65-0193228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASEY, SHIRLEY
2300 S.W. 112TH AVENUE
DAVIE, FL 33325 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: PD
Name: GESINO, BARBARA
Address: 1425 S. 24TH CT.
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD
Name: RUSSO, FRANCES
Address: 6391 HARDING ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: VPD
Name: FREEM, DEBRA
Address: 5260 S.W. 33RD WAY
City-St-Zip: HOLLYWOOD, FL 33312

Title: D
Name: STANCO, MILLIE
Address: 4927 S.W. 32ND WAY
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D
Name: CASEY, SHIRLEY
Address: 2300 SW 112 AVE.
City-St-Zip: DAVIE, FL 33325

Title: T
Name: CASEY, SHERRY
Address: 2300 SW 112TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33325

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: SHERRY CASEY

TREA

04/25/2011

Electronic Signature of Signing Officer or Director

Date