

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90049 041 ****61.25

DOCUMENT # N20828

1. Entity Name

THE ITALIAN AMERICAN CLUB OF CENTURY VILLAGE,
INC.



Principal Place of Business

CENTURY VILLAGE
PEMBROKE PINES FL 33027
US

Mailing Address

13055 S.W. 15 CT.
S-112
PEMBROKE PINES FL 33027
US

30017160



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

13700 SW 11 ST

3. Mailing Address

13700 SW 11 ST

Suite, Apt. #, etc.

APT. 401

Suite, Apt. #, etc.

APT. 401

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

33027

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIRHAN, SARA D
13055 S.W. 15 COURT
S-112
PEMBROKE PINES FL 33027

7. Name and Address of New Registered Agent

Name

Frank Incantalupo

Street Address (P.O. Box Number is Not Acceptable)

13700 SW 11 ST.

City

Pembroke Pines, FL

FL

Zip Code

33027

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME SIRHAN, SARA
STREET ADDRESS 13055 S.W. 15 COURT
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE TD ☐ Delete
NAME QUARTUCCIO, JAMES
STREET ADDRESS 12900 SW 7TH COURT STE B-209
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE VP ☒ Delete
NAME CAPODANNO, JOHN C
STREET ADDRESS 601 SW 431ST AVE
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE FS ☐ Delete
NAME NOGAN, DOROTHY
STREET ADDRESS 13701 SW 12TH ST
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE VPD ☒ Delete
NAME PACE, JAMES V
STREET ADDRESS 1000- SW 125TH AVE #N104
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE S ☐ Delete
NAME D'ANTONIO, MARY
STREET ADDRESS 13101-SW 15 CT APT R-203
CITY-ST-ZIP HOLLYWOOD FL 33027

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition
NAME Frank Incantalupo
STREET ADDRESS 13700 SW 11 ST
CITY-ST-ZIP Pembroke Pines, FL 33027

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Change ☒ Addition
NAME Marie Vitale
STREET ADDRESS 13055 SW 15 CT #105
CITY-ST-ZIP Pembroke Pines FL 33027

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME Hildegard Pipitone - VPD
STREET ADDRESS 12750 S.W. 4th Ct. J-201
CITY-ST-ZIP Pembroke Pines, FL 33027

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank Incantalupo

Date

2/7/05

Daytime Phone #

(954) 437-6510