

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 08, 2008 8:00 am**  
**Secretary of State**

02-08-2008 90033 027 \*\*\*\*66.25

DOCUMENT # N21578

1. Entity Name

SONS OF ITALY OF AMERICA 2436, INC.



Principal Place of Business

~~5810 COLLEGE ROAD~~  
KEY WEST FL 33040  
US

Mailing Address

P.O. BOX 5838  
KEY WEST FL 33045  
US



2. Principal Place of Business - No P.O. Box #

2405 N. ROOSEVELT BLVD.

Suite, Apt. #, etc.

THE LIONS CLUB BUILDING

City & State

Key West, FL

Zip

33040

Country

Monroe

3. Mailing Address

Same

Suite, Apt. #, etc.

AS

City & State

ABOVE

Zip

33045

Country

Monroe

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

TRUMBO, CARRIE V  
3635 SEASIDE DRIVE  
# 401  
KEY WEST FL 33040

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

CARRIE V. TRUMBO

CARRIE V. TRUMBO

2-1-2008

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, 2008

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 P  
NAME TRUMBO, CARRIE V  
STREET ADDRESS P.O. BOX 14  
CITY-ST-ZIP KEY WEST FL 33041 ☐ Delete

TITLE VP  
NAME SCHMITT, MARY L  
STREET ADDRESS 257 AVE A  
CITY-ST-ZIP KEY WEST FL 33040 ☒ Delete

TITLE T  
NAME CONTI (BOB), SALVATORE  
STREET ADDRESS 1203 16TH TERR  
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE FS  
NAME CICALSE, FRANK  
STREET ADDRESS 1203 16A TERR  
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE O  
NAME SIRECI, THOMAS J  
STREET ADDRESS 1128 FLAGLER DR  
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE VP  
NAME CYNTHIA MESSINA McCausland  
STREET ADDRESS 1604 FLAGLER AVE.  
CITY-ST-ZIP Key West, FL 33040 ☒ Change ☐ Addition

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

CARRIE V. TRUMBO

CARRIE V. TRUMBO

2-1-08

305-304-8555