

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21578

FILED  
Feb 14, 2009  
Secretary of State

Entity Name: SONS OF ITALY OF AMERICA 2436, INC.

## Current Principal Place of Business:

2405 N. ROOSEVELT BLVD.  
THE LIONS CLUB BUILDING  
KEY WEST, FL 33040 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 5838  
KEY WEST, FL 33045 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TRUMBO, CARRIE V  
3635 SEASIDE DRIVE  
# 401  
KEY WEST, FL 33040 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: P ( ) Delete  
Name: TRUMBO, CARRIE V  
Address: P.O. BOX 14  
City-St-Zip: KEY WEST, FL 33041

Title: VP ( ) Delete  
Name: MCCAUSLAND, CYNTHIA M  
Address: 1604 FLAGLER AVE.  
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete  
Name: CONTI (BOB), SALVATORE  
Address: 1203 16TH TERR  
City-St-Zip: KEY WEST, FL 33040

Title: FS ( ) Delete  
Name: CICALESSE, FRANK  
Address: 1203 16A TERR  
City-St-Zip: KEY WEST, FL 33040

Title: O ( ) Delete  
Name: SIRECI, THOMAS J  
Address: 1128 FLAGLER DR  
City-St-Zip: KEY WEST, FL 33040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: FS (X) Change ( ) Addition  
Name: CICALESSE, FRANK  
Address: 1203 16TH TERR  
City-St-Zip: KEY WEST, FL 33040

Title: O (X) Change ( ) Addition  
Name: SIRECI, THOMAS J  
Address: 1128 FLAGLER AVE  
City-St-Zip: KEY WEST, FL 33040

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: CARRIE V. TRUMBO

P

02/14/2009

Electronic Signature of Signing Officer or Director

Date