

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31054 (2)

1. Corporation Name

GLI AMICI ITALIAN-AMERICAN CLUB, INC.

Principal Place of Business

NOT AVAILABLE
MANATEE COUNCIL ON AGING
239 US 301 BLVD
BRADENTON FL 34208

Mailing Address

7116 14TH AVE. NW
C O MARY BORCAN
BRADENTON FL 34209-1102

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/07/1989

3a. Date of Last Report

04/26/1996

4. FEI Number

59-2525744

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

BORCSANI, MARY B

7116 14TH AVE NW

#284

BRADENTON FL 34209

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> DELETE
	T	TUMBILO, JOSEPH S	6813 18TH AVE DR. W BRADENTON FL 34209	
	P	BORCSANI, MARY	7116 14TH AVE NW BRADENTON FL	<input type="checkbox"/> DELETE
	T	GOCINSKI, DOLORES	2414 BAY DR W BRADENTON FL	<input type="checkbox"/> DELETE
	D	BIANCHI, LENA	3450 WOOD OWL CIRCLE #284 BRADENTON FL	<input checked="" type="checkbox"/> DELETE
	T	SALICCIOLI, AL	1829 FLAMINGO BLVD. BRADENTON FL 34207	<input checked="" type="checkbox"/> DELETE
	VP	RUGGERRI, SAM	534 SPRING LAKE, BLVD BRADENTON FL	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	GARY BROOKS			
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	P	← Same		
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	TR	← Same		
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	SGT/ARMS	Annabelle NOVELLO 6120 43 ST. W BRADENTON FL 34210		
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	PAULA Jensen	2535 Flemingo BLVD BRADENTON FL 34207		
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	JULIE GRADANTE	5525 58th Ave BRADENTON FL 34209		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary B Borcani, 4-19-97 441-7926974
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0061801

FILED
May 06 1997 8:00am
Secretary of State



CR2E037 (9/96)