

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35423

FILED
Feb 10, 2010
Secretary of State

Entity Name: ORDER SONS OF ITALY IN AMERICA PORT ST. LUCIE LODGE NO. 2594, INC.

Current Principal Place of Business:

765 SW DALTON CIR
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

Current Mailing Address:

765 SW DALTON CIR
PORT ST LUCIE, FL 34953 US

New Mailing Address:

765 SW DALTON CIR
PORT ST LUCIE, FL 34953 US

FEI Number: 65-0184225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEDOMINICIS, L. DONALD L L. DONA
3781 SAGE CT
PORT SAINT LUCIE, FL 349852 US

Name and Address of New Registered Agent:

PASSARIELLO, VIRGINIA A
437 SW DORCHESTER STREET
PORT ST LUCIE, FL 34983 US

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: VIRGINIA A PASSARIELLO

02/10/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MR
Name: ESPOSITO, JOHN M PRES.
Address: 1261 SW BARGELLO AVE.
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: MRS
Name: VIRGINIA, PASSARIELLO A V. PRES
Address: 437 SW DORCHESTER STREET
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: MRS
Name: GENCO, PAULA L SECT'Y
Address: 2897 CABANA LN
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: MRS
Name: JOHNSON, DIANNE L TREAS.
Address: 4388 SW VERINK ST
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: MR
Name: POLI, FRED L FIN/SEC
Address: 419 SW LAKEHURST DRIVE
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: MR
Name: NATE, RIVALDO L TRUST.
Address: 123 NW WILLOW GROVE
City-St-Zip: PORT ST LUCIE, FL 34986 US

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: JOHN M. ESPOSITO

PRES

02/10/2010

Electronic Signature of Signing Officer or Director

Date