## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38262

Jaņ 18, 2<u>012</u> Secretary of State

Entity Name: N.Y.C. DEPARTMENT OF SANITATION RETIREES & ASSOCIATES OF WEST FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5135 CARISSA CT

SPRING HILL, FL 34606 US

**Current Mailing Address: New Mailing Address:** 

5135 CARISSA CT

SPRING HILL, FL 34606 US

FEI Number: 58-1900885 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEGAETANO, GARY R 5135 CARISSÁ CT

SPRING HILL, FL 34606 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

HAMM, WILLIAM Name: Address: 7371 BOTANICAL DRIVE City-St-Zip: SPRING HILL, FL 34607 US

Title:

Name: STROM, RICHARD Address: 13943 TALMAGE LOOP City-St-Zip: HUDSON, FL 34667 US

Title:

CONNOLLY, ROBERT Name: Address: 8228 RHANBUOY ROAD City-St-Zip: SPRING HILL, FL 34606 US

Title:

Name: D'AMBROSIA, LEONARD 8055 BELLEVISTA CT. Address: City-St-Zip:

SPRING HILL, FL 34606 US

Title:

MENNA, ANTHONY Name: 8104 ROSE PETAL COURT Address: PORT RICHEY, FL 34668 City-St-Zip:

Title:

CAZZALINO, JOSEPH Name: Address: 13541 WOODSIDE DRIVE BAYONET POINT, FL 34667 US City-St-Zip:

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: GARY R. DEGAETANO **TREA** 01/18/2012