

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N38653

1. Entity Name

TOWNSHIP LODGE NO. 2624, INC. ORDER SONS OF ITAL

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90955 010 ****61.25

Principal Place of Business

Mailing Address

3781 N.W. 35 STREET
 COCONUT CREEK FL 33066
 US

3781 N.W. 35 STREET
 COCONUT CREEK FL 33066-2420
 US

2. Principal Place of Business

3. Mailing Address

4751 CARAMBOLA CIR. NO.

4751 CARAMBOLA CIR. NO.

Suite, Apt. #, etc.
 COCONUT CREEK, FL

Suite, Apt. #, etc.
 COCONUT CREEK FL.

City & State
 33066 U.S.

City & State
 33066 U.S.

Zip Country

Zip Country

4. FEI Number **65-0175290**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DALESSANDRO, SALVATORE
 3781 N.W. 35 STREET
 COCONUT CREEK FL 33066

Name **ZENONE CATHERINE**

Street Address (P.O. Box Number is Not Acceptable)
4751 CARAMBOLA CIR. NO.

COCONUT CREEK FL. 33066

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.

SIGNATURE **CATHERINE ZENONE**

Catherine Zenone Pres.

4/24/00

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**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete
 NAME **DALESSANDRO, SALVATORE**
 STREET ADDRESS **3781 N.W. 35 STREET**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **P** Change Addition
 NAME **ZENONE, CATHERINE**
 STREET ADDRESS **4751 CARAMBOLA CIR. NO.**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **VP** Delete
 NAME **AENONE, CATHERINE**
 STREET ADDRESS **4751 CARAMBOLA CIRCLE NORTH**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **VP** Change Addition
 NAME **TRIVELLI ANTHONY**
 STREET ADDRESS **6419 MALLARD'S WAY**
 CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE **D** Delete
 NAME **PASSANISI, MARY A**
 STREET ADDRESS **3729 N.W. 35TH ST.**
 CITY-ST-ZIP **COCONUT CREEK FL**

TITLE Change Addition

TITLE **DT** Delete
 NAME **SATIRA, BRUNO**
 STREET ADDRESS **4743 CARAMBOLA CIRCLE**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE Change Addition

TITLE **S** Delete
 NAME **FARRUGIA, JOAN**
 STREET ADDRESS **3723 N.W. 35TH ST.**
 CITY-ST-ZIP **COCONUT CREEK FL**

TITLE **S** Change Addition
 NAME **TRIVELLI, NORMA**
 STREET ADDRESS **6419 MALLARD'S WAY**
 CITY-ST-ZIP **COCONUT CREEK, FL. 33073**

TITLE **SD** Delete
 NAME **CORDILEON, GRACE**
 STREET ADDRESS **3955 CARAMBOLA CIRCLE NORTH**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE Change Addition

12. I 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 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: **CATHERINE ZENONE**

Catherine Zenone

4/24/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)