

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 27, 2001 8:00 am**  
**Secretary of State**

02-27-2001 90318 031 \*\*\*\*61.25

**DOCUMENT # N38653**

1. Entity Name

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

Principal Place of Business

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

Mailing Address

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

2. Principal Place of Business

**4751 CARAMBOLA CIRCLE North**

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

City & State  
**FL 33066**

Zip Country  
**U.S.A.**

3. Mailing Address

**4751 CARAMBOLA CIRCLE North**

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

City & State  
**33066**

Zip Country  
**U.S.A.**



DO NOT WRITE IN THIS SPACE

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

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

7. Name and Address of New Registered Agent

Name **ZENDNE CATHERINE**

Street Address (P.O. Box Number is Not Acceptable)  
**4751 CARAMBOLA CIRCLE NORTH**

**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**

**2/19/01**

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

TITLE **P** ☒ Delete  
 NAME **DALESSANDRO, SALVATORE**  
 STREET ADDRESS **3781 N.W. 35 STREET**  
 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 **D** ☒ Delete  
 NAME **PASSANISI, MARY A**  
 STREET ADDRESS **3729 N.W. 35TH ST.**  
 CITY-ST-ZIP **COCONUT CREEK FL**

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

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition  
 NAME **ZENONE, CATHERINE**  
 STREET ADDRESS **4751 CARAMBOLA CIRCLE NORTH**  
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **VP** ☒ Change ☐ Addition  
 NAME **CORSETTI ALDO**  
 STREET ADDRESS **3225 CARAMBOLA CIRCLE SO.**  
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
 NAME **STRIVELLI NORMA**  
 STREET ADDRESS **6419 MALLARDS WAY**  
 CITY-ST-ZIP **COCONUT CREEK FL 33073**

TITLE ☒ Change ☐ Addition  
 NAME **MANGIACOTTI WALTER**  
 STREET ADDRESS **5749 N.W. 101ST WAY**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33076**

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*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**2/19/01 977-9619**

CR2E037 (10/00)