

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90050 039 ****61.25

DOCUMENT # *N43919*

1. Entity Name

SONS OF ITALY, MARION COUNTY LODGE # 2648

DO NOT WRITE IN THIS SPACE

B0135998

2. Principal Place of Business

8701 S.E. 12th CT.

Suite, Apt. #, etc.

3. Mailing Address

8701 S.E. 12th CT.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

OCALA FL

City & State

OCALA FL

4. FEI Number

59-3073857

Applied For

Not Applicable

Zip

34480

Country

U.S.A.

Zip

34480

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

THOMAS INCORVAIA

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

8701 S.E. 12th CT.

City

OCALA

FL

Zip Code

34480

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

Thomas Incorvaia

THOMAS INCORVAIA

9/3/2

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

(NOT L: Registered Agent signature required when re-registering)

DATE

FEE IS \$61.25

Initial or Amended UBR

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
NAME
STREET ADDRESS
CITY - ST - ZIP

SEE ATTACHED LIST

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

Thomas Incorvaia

THOMAS INCORVAIA

9/3/2

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E037B (12/01)

Attachment

#N43919

Last Name	First Name	Title	Address	City	State	Zip Code
Incorvaia	Thomas	President	8701 SE 12th Ct.	Ocala	FL	34480
Santo	Sapia	Vice President	P.O. Box 1199	Bellevue	FL	33420
Dominick	Ragosta	Past President	502 NE 44th Terrace	Ocala	FL	34470
Virginia	D'Amico	Recording Secretary	484 Water Run	Ocala	FL	34472
Giorgio	Placanico	Financial Secretary	3917 NE 22nd St.	Ocala	FL	34470
Gloria	Ambrosecchia	Treasurer	P.O. Box 523	Candler	FL	32111
Joseph	Alfano	Orator	3809 SE 3rd St.	Ocala	FL	34471
William	Canary	Guard	8673 SE 60th Ave.	Ocala	FL	34472
Victor	DiFranzo	Guard	3220 SE 38th St.	Ocala	FL	34471
Mary	Mazzurco	Master of Ceremony	8555 SW 66th Terrace	Ocala	FL	34476
Bob	DeConna	Master of Ceremony	18 SE Broadway St.	Ocala	FL	34471
Nick	Ragosta	Trustee	558 Silver Course Loop	Ocala	FL	34472
Jerry	Silano	Trustee	2224 NE 39th Ave.	Ocala	FL	34470
Bill	DiBello	Trustee	8 Teak Run	Ocala	FL	34472
Dolly	Pino	Trustee	4500 SE 18th Ave.	Ocala	FL	34480
Luigi	Mastroserio	Trustee	23 Hickory Track Way	Ocala	FL	34472
Steve	D'Amico	Trustee	484 Water Run	Ocala	FL	34472
Joseph	Mazzurco	Trustee	8555 SW 66th Terrace	Ocala	FL	34476

Attachement

N43919



Sons of Italy Marion County Lodge #2648

To whom it may concern

I am the new president of our lodge. Since I did not receive a renewal notice, please accept our updated report and check. Sorry that I was not sent in sooner.

Thank you

Thomas Incorvaia
President



SHARING A RICH HERITAGE