2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N43919

1. Entity Name SONS OF ITALY, MARION COUNTY, LODGE NUMBER 2648. INC.



FILED Mar 24, 2006 8:00 am Secretary of State

03-24-2006 90023 034 ****61.25

2648, INC) .	,	1						
14077 N.E. 53RD COURT RD 140			14077 N.E. 53RD COURT RD		สูยบราจร	1.4			
2. Principal Place of Business 3		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03162006 _{CI}	ng-NP	CR2E03	17 (11/05)		
City & State	e ·	City & State	· · · · · · · · · · · · · · · · · · ·		4. FEI Number 59-307385	.7			oplied For
Zip	Country	Zip	Country		5. Certificate of St			\$8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New R			
00110711			Name	?		-			-
SCURTI, V 14077 NE CITRA, FL	53RD COURT RD		Street Addr		(P.O. Box Number is I	Not Acceptable	e)		
CHRA, FL	. 32113						•		
			City				FL	Zip Cod	e .
8. The above	named entity submits this statement for	or the purpose of changing its	registered office	or register	red agent, or both, in	the State of Flo		amiliar with,	and accept
the obligat	tions of registered agent.								
0.04.47.105									
SIGNATURE.	Strandura broad or named using of remistered areas	Land title if annicable (NOTE	: Registered Agent six	nsáturo rexusires	d when reinstation)	•	DATE		
	Signature, lyped or printed name of registered agent		: Registered Agent sig				DATE	pavable t	
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2006		npaign Financing		\$5.00 May Be Added to Fees		DATE Make check rida Depart		
	Filing Fee is \$61.25	9. Election Can Trust Fund C	npaign Financing	9 🗆	\$5.00 May Be	Flor	Make check	tment of S	tate
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Can Trust Fund C	npaign Financing Contribution.	9 🗆	\$5.00 May Be Added to Fees	Flor	Make check	tment of S	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATUR

VINCENTSCUET, President

Date

3-21-06

Phone #