

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46730

FILED  
Jan 22, 2007  
Secretary of State

**Entity Name:** ITALIAN-AMERICAN CLUB OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

2310 TRESCOTT DR  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

ITALIAN-AMERICAN CLUB  
P. O. BOX 12354  
TALLAHASSEE, FL 323172354 US

**New Mailing Address:**

**FEI Number:** 59-3175085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPALLA, ANTHONY  
2310 TRESCOTT DRIVE  
TALLAHASSEE, FL 32312 US

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

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:**

Title: P ( ) Delete  
Name: ECHTERNACHT, KENNETH  
Address: 3220 SHARER ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP ( ) Delete  
Name: VENTRE, FRANCIS  
Address: 3007 SHAMROCK NORTH #4  
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete  
Name: RICHARDS, STEVE  
Address: 2424 POTTS ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: MARTOCCI, SAL  
Address: 4702 HIGH GROVE ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete  
Name: SUSIE, DEBRA  
Address: 16010 SUNRAY ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Delete  
Name: LUPO, FRANK  
Address: 9012 SHORAL CREEK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FONDO, TONY  
Address: 1162 CAPITAL CIRCLE, SE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEVEN RICHARDS

T

01/22/2007

Electronic Signature of Signing Officer or Director

Date