

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 05, 2009
Secretary of State

DOCUMENT# N93000003942

Entity Name: LE ITALO-AMERICANE DI OGGI, INC.

Current Principal Place of Business:1331 SUMMERLINE CT
CLEARWATER, FL 33764**New Principal Place of Business:**6213 VISTA VERDE DR.
GULFPORT, FL 33707**Current Mailing Address:**PO BOX 7487
CLEARWATER, FL 33758**New Mailing Address:**

FEI Number: 59-3202774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:ABELA, BARBARA A
1746 PRINCE PHILIP ST
CLEARWATER, FL 33755 US**Name and Address of New Registered Agent:**BONVICINO, ANN MARIE
45 WOODS LANDING TRAIL
OLDSMAR, FL 34677 US

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: ANN MARIE BONVICINO

06/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PRES () Delete
Name: GRABINOWSKI, LUISA PRESIDE
Address: 1336 SUMMERLINE CT
City-St-Zip: CLEARWATER, FL 33764 USTitle: VP () Delete
Name: GRABIANOUSKI, LOUISE VICE-PR
Address: 1331 SUMMERLIN DR.
City-St-Zip: CLEARWATER, FL 33764 USTitle: SECT () Delete
Name: BECKLY, MARY ANN
Address: 3355 C. BRIDGE DR E
City-St-Zip: DUNEDIN, FL 34698 USTitle: TREA () Delete
Name: CARBONE, JOSEPHINE
Address: 2678 COUNTRY CLUB DR
City-St-Zip: CLEARWATER, FL 33761 USTitle: PALI () Delete
Name: CALABRESE, JULIE
Address: 6213 VISTA VERDE DR
City-St-Zip: SAINT PETERSBURG, FL 33707**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: CALABRESE, JULIE PRESIDE
Address: 6213 VISTA VERDE DR.
City-St-Zip: GULFPORT, FL 33707 USTitle: VP (X) Change () Addition
Name: ABELA, BARBARA A VICE-PR
Address: 1746 PRINCE PHILIP ST.
City-St-Zip: CLEARWATER, FL 33755 USTitle: SECT (X) Change () Addition
Name: MIELE, SHARON SECT
Address: 1687 ASHTON ABBEY RD.
City-St-Zip: CLEARWATER, FL 33755 USTitle: TREA (X) Change () Addition
Name: BONVICINO, ANN MARIE TREAS
Address: 45 WOODS LANDING TRAIL
City-St-Zip: OLDSMAR, FL 34677 USTitle: PALI (X) Change () Addition
Name: THOMPSON, CATHERINE PALI
Address: 10414 BUTIA PLACE
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify 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: ANN MARIE BONVICINO

TREA

06/05/2009

Electronic Signature of Signing Officer or Director

Date