2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N96000003227** Mar 06, 2000 8:00 am 1. Entity Name **Secretary of State** CLUB ITALIA, INC. 03-06-2000 90083 044 ****61.25 Mailing Address Principal Place of Business 441 TULIP DR 441 TULIP DR SEBASTIAN FL 32958-5543 SEBASTIAN FL 32968 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0656707 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PALMIERI, JIM 441 TULIP DR SEBASTIAN FL 32958 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME **PALMIERI JIM** NAME STREET ADDRESS 441 TULIP DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SEBASTIAN FL 32958 Delete Change ☐ Addition TITLE TITLE VPD řŘÉD MARANO PARLA, JO NAME NAME 919 SW LAUREL CIRCLE BAREFOOT BAY, FL. 32926 STREET ADDRESS STREET ADDRESS 494 COPLY TERR. CITY-ST-ZIP CITY-ST-ZIE SEBASTIAN FL 32958 Change TITLE ■ Addition TITLE SD □ Delete NAME GINISO, INA NAME STREET ADDRESS STREET ADDRESS 266 PERWINKLE DR CITY-ST-ZIP CITY-ST-ZIP SEBASTIAN FL 32958 ₹ Change ☐ Addition Delete TITLE TITLE NAME NAME CATINELLA, CAROLE A STREET ADDRESS STREET ADDRESS 338 MAIN ST CITY-ST-ZIP CITY-ST-ZIP SEBASTIAN FL 32958 Change ☐ Addition Delete TITLE MOAD TITLE CHARD HOPKINS NAME NAME CATINELLA, LEONARD M 170 JOY HAVEN DR. SEBASTIAN, FL. 32958 STREET ADDRESS STREET ADDRESS 338 MAIN ST CITY-ST-ZIP CITY-ST-ZIP SEBASTIAN FL 32958 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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

Jean Beudert 3-6-00 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

changed, or on an attachment with an address, with all other like empowere

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