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FILED

Feb 18 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000003917 (9)

1. Corporation Name

SONS OF ITALY DEERFIELD BEACH LODGE, INC.



Principal Place of Business

Mailing Address

8354 NW 55TH COURT
CORAL SPRINGS FL 33067

8354 NW 55TH COURT
CORAL SPRINGS FL 33067-2627

3. Date Incorporated or Qualified
07/25/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEL Number

65-0703494

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GATTUSO, SAL
8354 NW 55TH COURT
CORAL SPRINGS FL 33067

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME President
STREET ADDRESS Sal Gattuso
CITY-ST-ZIP 8354 N.W. 55th Court
Coral Springs FL 33067

TITLE ☐ DELETE
NAME Vice President
STREET ADDRESS Thelma Ardi
CITY-ST-ZIP 2043 SW 15 Street
Deerfield Beach FL 33442

TITLE ☐ DELETE
NAME Financial Secretary
STREET ADDRESS Josephine Bonfiglio
CITY-ST-ZIP 1937 SW 15 Street
Deerfield Beach FL 33442

TITLE ☐ DELETE
NAME Treasurer
STREET ADDRESS Catherine Brun
CITY-ST-ZIP 1985 SW 15 Street
Deerfield Beach FL 33442

TITLE ☐ DELETE
NAME Orator
STREET ADDRESS Anthony Palmieri
CITY-ST-ZIP 600 West Hillsborough Blvd #210
Deerfield Beach FL 33441

TITLE ☐ DELETE
NAME Recording Secretary
STREET ADDRESS Elvira Pezzola
CITY-ST-ZIP 1421 S. Ocean Blvd #208
Pompano Beach FL 33062

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME Trustee
1.3 STREET ADDRESS Madeline Maffelone
1.4 CITY-ST-ZIP 232 88 SW 57 Avenue #105
Boca Raton FL 33428

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME Stephanie Labbato
2.3 STREET ADDRESS 1937 SW 15 Street #46
2.4 CITY-ST-ZIP Deerfield Beach FL 33442

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME Trustee
3.3 STREET ADDRESS Claire Freitag
3.4 CITY-ST-ZIP 1937 SW 15 Street #46
Deerfield Beach FL 33442

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME Trustee
4.3 STREET ADDRESS Anthony Mauceri
4.4 CITY-ST-ZIP 1977 SW 15 Street #116
Deerfield Beach FL 33442

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME Trustee
5.3 STREET ADDRESS Nicoletta Sorice
5.4 CITY-ST-ZIP 1431 SW 25 Avenue
Deerfield Beach FL 33442

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED SAL GATTUSO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0025580

CR2E037 (9/96)

(964)
841-2479