2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State
03-31-2003 90148 036 ****61.25

DOCUMENT # N97000001279

1. Entity Name
AMERICAN ITALIAN CLUB OF THE PALM BEACHES, INC.

Principal Place of Business	Mailing Address
% EDWARD CHONKA 6238 RED CEDAR CIRCLE LAKE WORTH FL 33463	% EDWARD CHONKA 6238 RED CEDAR CIRCLE LAKE WORTH FL 33463

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
AL. ISCARO	AL. ISCARO
Suite, Apt. #, etc.: 2863-E-CROSLEY DR. W.	Suite, Apt. #, etc.: 2863-E-CROSLEY DR W.
City & State: WEST PALM BEACH, FL.	City & State: WEST PALM BEACH FL.
Zip: 33415 Country: U.S.A.	Zip: 33415 Country: U.S.A.

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARINELLI, JOHN P
1615 FORUM PLACE, STE. 500-B
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name: ANTHONY IANNELLO
Street Address (P.O. Box Number is Not Acceptable): 7777 NORTHTREE CLUB DR.
City: LAKE WORTH FL Zip Code: 33467

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: ANTHONY IANNELLO (V.P.) 3/26/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CHONKA, EDWARD 6238 RED CEDAR CIRCLE GREEN ACRES FL 33463	☐ Delete	P ALFONSE ISCARO 2863-E-CROSLEY DR. WEST W. P. BEACH, FL. 33415	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RAD, VINCENT 3811 SUMMER CREEK DRIVE LAKE WORTH FL 33467	☐ Delete	V.P. ANTHONY IANNELLO 7777 NORTHTREE CLUB DR. LAKE WORTH, FL. 33467	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GELO, ROSE 3531 PINE NEEDLE DRIVE # 27B1 GREEN ACRES FL 33463	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T TAWI, JOHN 2886 FARNLY DRIVE E # 46 WEST PALM BEACH FL 33415	☒ Delete	T VIRGINIA ISCARO 2995-E-CROSLEY DR. WEST W. P. BEACH, FL. 33415	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONTALBANO, JOE 2569 W.DUDLEY DRIVE "B" W.P.B. FL 33415	☒ Delete	D CHARLES PETRETTI 124 ROSEWOOD LANE GREENACRES, FL. 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARAVONE, FRED 331 SOUTH HAMPTON "B" W.P.B. FL 33417	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFONSE ISCARO 3/26/03 1-561-969-9622

2 Attachment

NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

900655 65

N97000001279

1. Entity Name

AMERICAN ITALIAN CLUB OF THE PALM BEACHES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2863-E- CROSLEY DR. WEST	2863-E-CROSLEY DR. WEST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
WEST PALM BEACH, FL.	WEST PALM BEACH, FL.
City & State	City & State
33415 U.S.A.	33415 U.S.A.
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ANTHONY IANNIELLO

Street Address (P.O. Box Number is Not Acceptable): 7777 NORTHTREE CLUB DRIVE

City: LAKE WORTH FL Zip Code: 33467

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: ANTHONY IANNELLO V.P. 3/26/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	TITLE	
NAME	ALFONSE ISCARO	NAME	
STREET ADDRESS	2863-E- CROSLEY DR. WEST	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL. 33415	CITY-ST-ZIP	
TITLE	V.P.	TITLE	
NAME	ANTHONY IANNELLO	NAME	
STREET ADDRESS	7777 NORTHTREE CLUB DRIVE	STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH, FL. 33467	CITY-ST-ZIP	
TITLE	S	TITLE	
NAME	ROSE GELLO	NAME	
STREET ADDRESS	3531 PINE NEEDLE DR #2781	STREET ADDRESS	
CITY-ST-ZIP	GREEN ACRES, FL. 33463	CITY-ST-ZIP	**DO NOT WRITE**
TITLE	T	TITLE	
NAME	VIRGINIA ISCARO	NAME	**IN THIS SPACE**
STREET ADDRESS	2995-E- CROSLEY DR. WEST	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL. 33415	CITY-ST-ZIP	
TITLE	PAST P.	TITLE	
NAME	EDWARD CHONKA	NAME	
STREET ADDRESS	6238 RED CEDAR CIRCLE	STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH, FL. - 33463	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	FRED CARAVONE	NAME	
STREET ADDRESS	2531 EMORY WEST #E	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL. 33415	CITY-ST-ZIP	

CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: ALFONSE ISCARO (P) 3/26/03 1-561-969-9622

Attachment #

90065565

N97000001279

ADDITIONAL DIRECTORS

CHARLES PETRETTI
124 ROSEWOOD LANE
GREENACRES, FL. 33463

JESSIE RAO
3811 SUMMER CREEK DR.
LAKE WORTH, FL. 33467

ED WARNER
1111 GREEN PINE BLVD. G3
WEST PALM BEACH, FL. 33409

VINCENT RAO
3811 SUMMER CREEK DR.
LAKE WORTH, FL. 33467