

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002533

FILED
Jun 18, 2012
Secretary of State

Entity Name: SICILIAN-AMERICAN CULTURAL SOCIETY, INC.

Current Principal Place of Business:

1007 SW 5TH CT
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

1007 SW 5TH CT
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 65-0830487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARINELLI, JOHN P ESQ
1615 FORUM PLACE, SUITE 500-B
WEST PALM BEACH, FL 33401 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
Name: ADAMS, ALVIN A
Address: 1007 SW 5TH CT
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP
Name: DIGILIO, MARY
Address: 4899 NW 5TH AVE.
City-St-Zip: BOCA RATON, FL 33431

Title: VP
Name: GIAMBALVO, BARNEY
Address: 4894 SUGARPINE DR
City-St-Zip: BOCA RATON, FL 33487

Title: SD
Name: ADAMS, ROSALIE
Address: 1007 SW 5TH CT
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T
Name: LOFRIA, CAMILLE
Address: 9850 A BISHOFIA TREE WAY
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D
Name: TRAINA, FRANCESCO
Address: 1508 BAY BLVD. #1261
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: ALVIN A. ADAMS

PRES

06/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date