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03 JUN 16 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMENDED

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

DOCUMENT # N98000006914

1. Entity Name
THE ITALIAN AMERICAN CLUB OF TAMARAC, INC.

600020883876
06/16/03--01035--004 **61.25

Principal Place of Business	Mailing Address
7029 N. UNIVERSITY DR. TAMARAC, FL 33321	7029 N. UNIVERSITY DR. TAMARAC, FL 33321

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
8201 N.W. 74th Ave. Suite, Apt. #, etc.	8201 N.W. 74th Ave. Suite, Apt. #, etc.
City & State: TAMARAC	City & State: Tamarac
Zip: 33321 Country: USA	Zip: 33321 Country: USA

4. FEI Number: 65-0911514 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BLANCHARDX, JOHN 7629 N. UNIVERSITY DR. TAMATAC, FL 33321	Name: ANGELO MELA Street Address (P.O. Box Number is Not Acceptable): 8201 N.W. 74th Avenue City: TAMARAC FL Zip Code: 33321

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: Angelo Mela signed by attorney-in-fact Chet Bickey DATE: 6/12/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

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	D BINACA, DANA 7624 N. UNIVERSITY DR. TAMARAC, FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Joseph Gaudio 4400 N.W. 30th St. Coconut Creek, FL 33056	☒ Change ☐ Addition PD
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANCO, JOHN 7629 N. UNIVERSITY DR. TAMARAC, FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Angelo Mela 8201 N.W. 74th Ave. Tamarac, FL 33321	☒ Change ☐ Addition D Chairman Board
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDST BLANCHARD, JOHN 7629 N. INIVERSITY DR. TAMARAC, FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Grace Santapria 5102 N.W. 55rd Street Tamarac, FL 33321	☒ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Joseph Cannone 8270 N.W. 95th Ave. Tamarac, FL 33321	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Josephine Germano 9330 Lime Bay Blvd. Apt. 304 Tamarac, FL 33321	☐ Change ☒ Addition ST
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Angelo Mela signed by attorney-in-fact Chet Bickey 6/12/03 (954) 718-3388
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ANGELO MELA

gr 6/16