# 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000005437

Entity Name: NAPLES ITALIAN AMERICAN FOUNDATION, INC.

FILED Nov 05, 2019 Secretary of State 6840900535CC

## **Current Principal Place of Business:**

7035 AIRPORT RD N NAPLES, FL 34109

### **Current Mailing Address:**

7035 AIRPORT RD N NAPLES, FL 34109

FEI Number: 20-5045417 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

NAPLES ITALIAN AMERICAN FOUNDATION, INC 7035 AIRPORT RD N NAPLES, FL 34109 US  $\,$ 

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: RENALD P MORANI 11/05/2019

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title **PRES** Title VΡ Name PASCENTE, ROBERT Name KAMINSKI, MICHAEL 7035 AIRPORT RD N 7035 AIRPORT RD N Address Address City-State-Zip: NAPLES FL 34109 NAPLES FL 34109 City-State-Zip: SEC Title Title **VP TREAS** Name VIPIANI, PRUDENCE Name WILE, VIRGINIA Address 7035 AIRPORT ROAD Address 7035 AIRPORT RD N City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109 Title **MANAGER** Title VP PUB/COMM Name GRUPPUSO, NANCY STUART, CHARLES Name Address 7035 AIRPORT RD N Address 7035 AIRPORT RD N City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: VIRGINIA WILE

TREASURER 11/05/2019

Date