DELRAY BEAC				
Current Ma	ling Address:			
7459 VIALE	CATERINA			
DELRAY BE	ACH, FL 33446 US			
FEI Number: 80-0927478			Certificate of Status Desir	r ed: No
Name and A	Address of Current Registered Agent:			
LEPORE, MICH 7459 VIALE CA DELRAY BEAC				
The above name	d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flor	ida.
The above name		tered office or regis	tered agent, or both, in the State of Flor	ida.
		tered office or regis	tered agent, or both, in the State of Flor.	ida. Date
SIGNATURI	E:	tered office or regis	tered agent, or both, in the State of Flor	
SIGNATURI	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flor.	
SIGNATURI Officer/Dire	Electronic Signature of Registered Agent			
SIGNATURI Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : PRES	Title	VP	
SIGNATURI Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : PRES LEPORE, MICHAEL D 7179 VIA GENOVA	Title Name	VP GUARDALA, FRANK A 7459 VIALE CATERINA	
SIGNATURI Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PRES LEPORE, MICHAEL D 7179 VIA GENOVA	Title Name Address	VP GUARDALA, FRANK A 7459 VIALE CATERINA	
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : PRES LEPORE, MICHAEL D 7179 VIA GENOVA DELRAY BEACH FL 33446	Title Name Address	VP GUARDALA, FRANK A 7459 VIALE CATERINA	
SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : PRES LEPORE, MICHAEL D 7179 VIA GENOVA DELRAY BEACH FL 33446 TRES	Title Name Address	VP GUARDALA, FRANK A 7459 VIALE CATERINA	

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: FRANK A GUARDALA

Electronic Signature of Signing Officer/Director Detail

Entity Name: VILLA BORGHESE ITALIAN AMERICAN CULTURAL CLUB INC

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

7459 VIALE CATERINA

DOCUMENT# N13000004926

03/20/2014

VICE PRESIDENT

Date