

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N43245**

1. Entity Name

POLISH AMERICAN CLUB POLONEZ INC.

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90108 017 ****61.25

Principal Place of Business 7310 SOUTHGATE BLVD. NORTH LAUDERDALE FL 33068 US	Mailing Address 7310 SOUTHGATE BLVD. NORTH LAUDERDALE FL 33068-1427 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip	Country	City & State Zip	Country
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0267658	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JESSE WROZOSEK
4101 N. OCEAN BLVD.
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name **JESSE WRZOSEK**
 Street Address (P.O. Box Number is Not Acceptable)
8195 N.W 40TH CT.
 City **CORAL SPRINGS** FL Zip Code **33065**

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.

SIGNATURE **JESSE WRZOSEK** *Jesse Wrzosek* **2-29-00**
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
Department of State**

10. OFFICERS AND DIRECTORS		<input checked="" type="checkbox"/> Delete
TITLE	T	<input checked="" type="checkbox"/>
NAME	KALINSKI, ANNA	
STREET ADDRESS	8247 NW 70TH STREET	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	SVPD	<input checked="" type="checkbox"/>
NAME	WRZOSEK, JESSIE	
STREET ADDRESS	4101 N. OCEAN BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	PD	<input checked="" type="checkbox"/>
NAME	ZBIG-NIEW SARZYŃSKI	
STREET ADDRESS	6501 5084	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	VPT	<input type="checkbox"/>
NAME	ZYCH, JOHN	
STREET ADDRESS	4229 N. OCEAN DR.	
CITY-ST-ZIP	LAUDERDALE BY THE SEA FL 33308	
TITLE	S	<input checked="" type="checkbox"/>
NAME	CEGIELSKI, JAREK	
STREET ADDRESS	1490 ABON LANE - 1324	
CITY-ST-ZIP	N. LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/>
NAME	RYSZARD KISIELEWICZ	
STREET ADDRESS	3100 RIVERSIDE DR., #312	
CITY-ST-ZIP	CORAL SPRINGS FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	T	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NAME	JOLANTA BAS		
STREET ADDRESS	400 E. ATLANTIC BLVD., #21		
CITY-ST-ZIP	POMPAHO BEACH FL 33060		
TITLE	PD	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NAME	JESSE WRZOSEK		
STREET ADDRESS	8195 N.W. 40TH CT.		
CITY-ST-ZIP	CORAL SPRINGS-FL		
TITLE	S	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NAME	DANUTA PTAK		
STREET ADDRESS	8202 N.W 93rd TER.		
CITY-ST-ZIP	TAMARAC, FL 33321		
TITLE	SVP	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NAME	EDWARD RUS		
STREET ADDRESS	8194 PALM GATE DR.		
CITY-ST-ZIP	BOYNTON BEACH, FL		
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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: **JESSE WRZOSEK** *Jesse Wrzosek* **2-29-00** **(954) 757-2640**
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)