

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003821

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: POLISH-SLAVIC CHARITABLE ASSOCIATION, INC.

## Current Principal Place of Business:

1850 N.E. 169 ST., APT. 404  
N. MIAMI, FL 33162

## New Principal Place of Business:

1850 N.E. 169 ST., SUITE 404  
N. MIAMI, FL 33162

## Current Mailing Address:

1850 N.E. 169 ST., APT. 404  
N. MIAMI, FL 33162

## New Mailing Address:

1850 N.E. 169 ST., SUITE 404  
N. MIAMI, FL 33162

FEI Number: 31-1656797

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLUCZ, JERZY  
1850 N.E. 169 ST., APT. 404  
N. MIAMI, FL 33162 US

## Name and Address of New Registered Agent:

KLUCZ, JERZY  
1850 N.E. 169 ST., SUITE 404  
N. MIAMI, FL 33162 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:

04/23/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: KLUCZ, JERZY  
Address: 1850 N.E. 169 ST., APT. 404  
City-St-Zip: N. MIAMI, FL 33162

Title: DV ( ) Delete  
Name: REGN, MARYLA  
Address: 17021 N BAY RD APT 519  
City-St-Zip: N MIAMI BEACH, FL 33160

Title: DVS ( ) Delete  
Name: ALICJA, BOGUSKI  
Address: 7150 INDIAN CREEK DR. APT. 206  
City-St-Zip: MIAMI BEACH, FL 33141

Title: DT ( ) Delete  
Name: THOMAS, ROBERT  
Address: 1155 MARSEILLE DR, APT 31  
City-St-Zip: MIAMI BEACH, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVS (X) Change ( ) Addition  
Name: BOGUSKI, ALICJA  
Address: 7150 INDIAN CREEK DR. APT. 206  
City-St-Zip: MIAMI BEACH, FL 33141

Title: DT (X) Change ( ) Addition  
Name: SZOSTAK, LESZEK  
Address: 499 NE 37 STREET. APT 6  
City-St-Zip: MIAMI BEACH, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KLUCZ JERZY

DP

04/23/2008

Electronic Signature of Signing Officer or Director

Date