#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005227

Entity Name: FILIPINO-AMERICAN ASSOCIATION OF POLK COUNTY, INC.

**FILED** Apr 01, 2019 **Secretary of State** 4003681053CC

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

5835 BARTOW RD S LAKELAND, FL 33813

## **Current Mailing Address:**

PO BOX 90621

LAKELAND, FL 33804 US

FEI Number: 59-3513645 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MAYER, CHARLES R 5835 BARTOW RD S LAKELAND, FL 33813 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

Title	PRESIDENT	Title	SECRETARY
Name	JAIN, LAURA	Name	HARRIS, FE
Address	1488 NORTH LAKE MIRROR DR. NW	Address	P O BOX 1717

City-State-Zip: EATON PARK FL 33840-1717 City-State-Zip: WINTER HAVEN FL 33881

Title **BOARD MEMBER** Title **TREASURER** Name ACOSTA, SHEILA Name TALLO, DAISY

Address 8059 RIDGEGLEN CIRCLE E Address 725 HIGHLANDS PLACE BLVD

LAKELAND FL 33809 City-State-Zip: City-State-Zip: LAKELAND FL 33813

PUBLIC RELATIONS OFFICER Title Title **BOARD MEMBER** 

Name RARO, FLORIE Name ADRIANO, MILA

Address P O BOX 1717 Address 528 CRESCENT HILLS WAY

City-State-Zip: EATON PARK FL 33840-1717 LAKELAND FL 33813 City-State-Zip:

Title **BOARD MEMBER** Title **BOARD MEMBER** Name SOLOMON, ELLEN ONDRA, MARILOU Name P O BOX 1717 Address

343 HEATHER POINT Address

City-State-Zip: EATON PARK FL 33840-1717 City-State-Zip: LAKELAND FL 33809

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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.

04/01/2019 **PRESIDENT** SIGNATURE: LAURA JAIN

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

TitleEX OFFICIOTitleBOARD MEMBERNameBULILAN, PAULNameBOLATETE, FR. RAMON

Address 1757 ALTAVISTA CIRCLE Address P O BOX 1717

City-State-Zip: LAKELAND FL 33810 City-State-Zip: EATON PARK FL 33840-1717

TitleBOARD MEMBERTitleBOARD MEMBERNamePASILIAO, HELENNameALEJO, REMARSAddressP O BOX 1717AddressP O BOX 1717

City-State-Zip: EATON PARK FL 33840-1717 City-State-Zip: EATON PARK FL 33840-1717

TitleBOARD MEMBERTitleBOARD MEMBERNameLADIA, ARNOLDNameMEDINA, ALICEAddressP O BOX 1717AddressP O BOX 1717

City-State-Zip: EATON PARK FL 33840-1717 City-State-Zip: EATON PARK FL 33840-1717

TitleBOARD MEMBERTitleBOARD MEMBERNameARROYO, GENENameMOSKAL, GINAAddressP O BOX 1717AddressP.O. BOX 1717

City-State-Zip: EATON PARK FL 33840-1717 City-State-Zip: EATON PARK FL 33849