2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005227

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

Current Principal Place of Business:

5835 BARTOW RD S LAKELAND, FL 33813

Current Mailing Address:

P O BOX 1717 EATON PARK, FL 33840-1717

FEI Number: 59-3513645

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MAYER, CHARLES R 5835 BARTOW RD S LAKELAND, FL 33813 US Certificate of Status Desired: No

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:

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:	WINTER HAVEN FL 33881	City-State-Zip:	EATON PARK FL 33840-1717		
Title	ACTING TREASURER	Title	BOARD MEMBER		
Name	RAMOS, FE LUCILLE	Name	ACOSTA, SHEILA		
Address	3749 HAMPTON HILLS DR.	Address	8059 RIDGEGLEN CIRCLE E		
City-State-Zip:	LAKELAND FL 33810	City-State-Zip:	LAKELAND FL 33809		
Title	BOARD MEMBER	Title	BOARD MEMBER		
Name	ADRIANO, MILA	Name	TALLO, DAISY		
Address	528 CRESCENT HILLS WAY	Address	725 HIGHLANDS PLACE BLVD.		
City-State-Zip:	LAKELAND FL 33813	City-State-Zip:	LAKELAND FL 33813		
Title	PUBLIC RELATIONS OFFICER	Title	BOARD MEMBER		
Name	RARO, FLORIE	Name	ONDRA, MARILOU		
Address	P O BOX 1717	Address	343 HEATHER POINT		
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.

SIGNATURE: FE LUCILLE RAMOS

ACTING TREASURER 04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 18, 2016 Secretary of State CC1685186484

Date

Officer/Director Detail Continued :

Title	BOARD MEMBER	Title	EX OFFICIO
Name	SOLOMON, ELLEN	Name	BULILAN, PAUL
Address	P O BOX 1717	Address	1757 ALTAVISTA CIRCLE
City-State-Zip:	EATON PARK FL 33840-1717	City-State-Zip:	LAKELAND FL 33810
Title	BOARD MEMBER	Title	BOARD MEMBER
Name	RAMOS, EDNA	Name	BOLATETE, FR. RAMON
Address	P O BOX 1717	Address	P O BOX 1717
City-State-Zip:	EATON PARK FL 33840-1717	City-State-Zip:	EATON PARK FL 33840-1717
Title	BOARD MEMBER	Title	BOARD MEMBER
Name	PASILIAO, HELEN	Name	ALEJO, REMARS
Address	P O BOX 1717	Address	P O BOX 1717
City-State-Zip:	EATON PARK FL 33840-1717	City-State-Zip:	EATON PARK FL 33840-1717
Title	BOARD MEMBER	Title	BOARD MEMBER
Name	LADIA, ARNOLD	Name	MEDINA , ACE
Address	P O BOX 1717	Address	P O BOX 1717
City-State-Zip:	EATON PARK FL 33840-1717	City-State-Zip:	EATON PARK FL 33840-1717
Title	BOARD MEMBER		
Name	ARROYO, GENE		
Address	P O BOX 1717		

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