

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005227

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

**FILED**  
**Feb 14, 2021**  
**Secretary of State**  
**8121689970CC**

**Current Principal Place of Business:**

1488 NORTH LAKE MIRROR DR. NW  
WINTER HAVEN, FL 33881

**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:**

MEDINA, MARIA ALICIA P  
211 S LAKE FLORENCE DR  
WINTER HAVEN, FL 33884 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:** MARIA ALICIA P MEDINA

02/14/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title EX OFICIO  
Name JAIN, LAURA  
Address 1488 NORTH LAKE MIRROR DR. NW  
City-State-Zip: WINTER HAVEN FL 33881

Title SECRETARY  
Name HARRIS, FE  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title PUBLIC RELATIONS OFFICER  
Name TALLO, DAISY  
Address 725 HIGHLANDS PLACE BLVD  
City-State-Zip: LAKELAND FL 33813

Title BOARD MEMBER  
Name JAIN, MANUEL  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name ADRIANO, MILA  
Address 528 CRESCENT HILLS WAY  
City-State-Zip: LAKELAND FL 33813

Title VP  
Name RARO, FLORIE  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title PRESIDENT  
Name ONDRA, MARILOU  
Address 343 HEATHER POINT  
City-State-Zip: LAKELAND FL 33809

Title BOARD MEMBER  
Name BADIOLA, TING  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

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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:** MARIA ALICIA P MEDINA

**TREASURER**

02/14/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name RANCES, CHI  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name PASILIAO, HELEN  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name LADIA, ARNOLD  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name MOSKAL, GINA  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name SORIANO, HAZEL  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title BOARD MEMBER  
Name ALEJO, REMARS  
Address PO BOX 90621  
City-State-Zip: LAKELAND FL 33804

Title TREASURER  
Name MEDINA, MARIA ALICIA P  
Address 211 S LAKE FLORENCE DR  
City-State-Zip: WINTER HAVEN FL 33884