

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 713104

1. Entity Name

THE POLISH-AMERICAN CLUB OF HOLLYWOOD, FLORIDA,

Principal Place of Business

3861 STIRLING ROAD
FT. LAUDERDALE FL 33312

Mailing Address

3861 STIRLING ROAD
FT. LAUDERDALE FL 33312-6216

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6143418

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POLUKORT, BERNICE
3420 SW 47TH AVE
HOLLYWOOD FL 33021

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	GAWARECKI, WILLIAM	
STREET ADDRESS	4670 NE 15TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	V	<input type="checkbox"/> Delete
NAME	RANASUK, AL	
STREET ADDRESS	5790 SW 35TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	T	<input type="checkbox"/> Delete
NAME	MUSIAL, ADRIAN	
STREET ADDRESS	6761 MCCLELLAN ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	EVANS, CLARA	
STREET ADDRESS	2870 NW 106TH AVE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZIGMUNT, DORIS	
STREET ADDRESS	2600 SIMMS ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	FS	<input type="checkbox"/> Delete
NAME	EDWARDS, RANDI	
STREET ADDRESS	7608 SIMMS STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33024	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANASUK, AL	
STREET ADDRESS	5790 SW 35th Avenue	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, CLARA	
STREET ADDRESS	10452 NW 48 MANOR	
CITY-ST-ZIP	CORAL SPRINGS, FL 33076	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZIGMUNT, DORIS	
STREET ADDRESS	7600 SIMMS STREET	
CITY-ST-ZIP	HOLLYWOOD, FL 33024	
TITLE	FS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARDS, RANDI	
STREET ADDRESS	7451 NW 16th STREET #302	
CITY-ST-ZIP	MIAMI, FL 33313	

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:

Adrian J. Musial
Adrian J. Musial, Treasurer

2/9/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)