

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737598

FILED
May 15, 2006
Secretary of State

Entity Name: POLISH-AMERICAN SOCIAL CLUB, INC.

Current Principal Place of Business:

343 N.W. PRIMA VISTA BLVD.
PT. ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

343 N.W. PRIMA VISTA BLVD.
PT. ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 59-1876966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MROZ, IRENE M
20 MEDITERRANEAN BLVD E
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

BUTLER, CAROL J
2870 GREGORY LANE
FORT PIERCE, FL 34981 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: CAROL J BUTLER

05/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MROZ, IRENE M
Address: 20 MEDITERRANEAN BLVD E
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP () Delete
Name: GLAZ, MARION
Address: 280 SW LUCERO DR
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: RS () Delete
Name: GREEN, JOANNE
Address: 515 SE FELIX AVE
City-St-Zip: PT. ST. LUCIE, FL 34984

Title: T () Delete
Name: SAPUTA, LOTTIE
Address: 407 POPULAR AVE
City-St-Zip: PT. ST. LUCIE, FL 34952

Title: D () Delete
Name: DONLE, IRENE
Address: 3212 NE HOLLY CREEK DR
City-St-Zip: JENSEN BEACH, FL 34952

Title: D () Delete
Name: KRYAK, ROBERT
Address: 14 LAKE VISTA TRAIL #105
City-St-Zip: PORT SAINT LUCIE, FL 34950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTLER, CAROL J
Address: 2870 GREGORY LANE
City-St-Zip: FORT PIERCE, FL 34981

Title: VP (X) Change () Addition
Name: NASO, JOHN
Address: 456 NW CASANOVA CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: RS (X) Change () Addition
Name: WHEELER, MARGARET A
Address: 5501 NW EVANSTON AVE
City-St-Zip: PT. ST. LUCIE, FL 34983-145

Title: T (X) Change () Addition
Name: SCHAUS, CATHERINE E
Address: 1671 SW VICTOR LANE
City-St-Zip: PT. ST. LUCIE, FL 34984

Title: D (X) Change () Addition
Name: GLAZ, MARION
Address: 280 SW LUCERO DR.
City-St-Zip: PORT ST. LUCIE, FL 34983

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHERINE E. SCHAUS

TREA

05/15/2006

Electronic Signature of Signing Officer or Director

Date