

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761604

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE POLISH-AMERICAN SOCIAL CLUB OF VERO BEACH, FLORIDA, INC.

Current Principal Place of Business:

7500 N. US #1, BOX 6508
VERO BCH, FL 32961

New Principal Place of Business:

Current Mailing Address:

7500 N. US #1
P.O. BOX 6508
VERO BCH, FL 32961

New Mailing Address:

FEI Number: 59-2242674 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOHNSON, ELAINE K
13035 BAY STREET, BOX 52
ROSELAND, FL 32957 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LIBBOS, GEORGE
Address: 897 WENTWORTH STREET
City-St-Zip: SEBASTIAN, FL 32958 US

Title: T () Delete
Name: JOHNSON, ELAINE K
Address: PO BOX 52
City-St-Zip: ROSELAND, FL 32957 US

Title: VP () Delete
Name: RAKOWSKI, DONALD
Address: 4340 12TH STREET SW
City-St-Zip: VERO BEACH, FL 32968 US

Title: D () Delete
Name: KLIMAS, HARRY
Address: 1756 27TH AVENUE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: SYNAKOWSKI, LOUIS
Address: 1635 12TH STREET
City-St-Zip: VERO BEACH, FL 32960 US

Title: S () Delete
Name: AMBERGROMBIE, ANNIE
Address: 41 VISTA GARDENS TERRACE
City-St-Zip: VERO BEACH, FL 32962 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: KRAWCZYKIEWIC, PAUL
Address: 845 20TH AVENUE
City-St-Zip: VERO BEACH, FL 32960 US

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

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

Title: S (X) Change () Addition
Name: DE LAURO, BLANCHE
Address: 142 TUDOR ROAD SW
City-St-Zip: PALM BAY, FL 32908 US

I hereby certify that the information supplied with this filing does not qualify 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: ELAINE K. JOHNSON

T

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date