

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000625

FILED
Jul 08, 2008
Secretary of State

Entity Name: POLISH AMERICAN CONGRESS CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

5711 N. MILWAUKEE AVENUE
CHICAGO, IL 60646

New Principal Place of Business:

Current Mailing Address:

5711 N. MILWAUKEE AVENUE
CHICAGO, IL 60646

New Mailing Address:

FEI Number: 36-2732238 **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:

TWAROWSKI, GREGORY
981 CALOOSA DR
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

TWAROWSKI, GREGORY
981 CALOOSA DR
SARASOTA, FL 34234 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: GREGORY TWAROWSKI

07/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCT () Delete
Name: KUCZYNSKI, LES
Address: 6100 N. CICERO AVENUE
City-St-Zip: CHICAGO, IL

Title: D () Delete
Name: NOWOTARSKI, CHRISTOPHER
Address: 221 N LASELLE ST 32ND FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: TOKARSKI, STEVE
Address: 7803 W. 75TH AVENUE
City-St-Zip: SCHERERVILLE, IN 46375

Title: PT () Delete
Name: SIKORA, VIRGINIA
Address: 6643 NORTH NORTHWEST HWY 2ND FLOOR
City-St-Zip: CHICAGO, IL 60631

Title: S () Delete
Name: KOMOROWSKI, PAMELA
Address: 6036 WEST MIAMI AVE
City-St-Zip: CHICAGO, IL 60646

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VCT (X) Change () Addition
Name: KUCZYNSKI, LES
Address: 6100 N. CICERO AVENUE
City-St-Zip: CHICAGO, IL 60646

Title: VP (X) Change () Addition
Name: NOWOTARSKI, CHRISTOPHER
Address: 1 E. WACKER DR., SUITE 2610
City-St-Zip: CHICAGO, IL 60601

Title: VP (X) Change () Addition
Name: TOKARSKI, STEVE
Address: 7803 W. 75TH AVENUE
City-St-Zip: SCHERERVILLE, IN 46375

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

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

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: PAMELA J. KOMOROWSKI

SECR

07/08/2008

Electronic Signature of Signing Officer or Director

Date