2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jul 24, 2008 8:00 am Secretary of State **DOCUMENT # N02000007802** 07-24-2008 90015 044 ****61.25 1. Entity Name POLISH AMERICAN CONGRESS HOUSING FOUNDATION, OF WEST CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 40111200 9190 49TH ST N 9190 49TH ST N N PINELLAS PARK, FL 33782-5228 N PINELLAS PARK, FL 33782-5228 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 02182008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 47-0894303 Not Applicable Zip Zîp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEST, WALLACE MR 6507 107TH TERR Street Address (P.O. Box Number is Not Acceptable) PINELLAS PARK, FL 33782 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to П Due by May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TILLE ☐ Delete TM F ☐ Change ☐ Addition NAME TWAROWSKI, GREGORY NAME PO BOY 1148 ONECO FL 34264 981 CALOOSA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA: FL 34234 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PERKOWSKI, WOJCIECH NAME NAME 950 SCHERER WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OSPREY, FL 34229 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WEST, WALLY NAME NAME STREET ADDRESS 6507 107TH TERR N STREET ADDRESS PINELLAS PARK, FL 33782 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARKE MARKUT, KRYSTYNA 1208 S DUNCAN AVE. STREET ADDRESS STREET ADDRESS CLEARWATER, FL 33756 CITY-ST-ZIP CITY-ST-ZIP TITLE 🗘 Delete ☐ Change Addition SAWA, EDWARD NAME NAME 3660 WHITE PINE CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238 CATY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

JORKASKY, RICHARD

6240 CARDINAL CREST DR

NEW PORT RICHEY, FL 34655

SIGNATURE: Year Juvarrosai		TWAZOWSKI	7/21/08	941-809-6600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date	Daytime Phone #