2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2006 8:00 am
Secretary of State
04-11-2006 90112 044 ****61.25

DOCUMENT # N04000004193

1. Entity Name

MARIA KONOPNICKA'S SATURDAY POLISH SCHOOL, INC.

Principal Place of Business	Mailing Address
141 CARMELITE DRIVE BUNNELL FL 32110	11 RESTON PLACE PALM COAST FL 32164

1st MOORE CR2E037 (10/05)

2. Principal Place of Business	3. Mailing Address
119 CARMELITE DRIVE	119 CARMELITE DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BUNNELL, FL	City & State: BUNNELL, FL
Zip: 32110 Country:	Zip: 32110 Country:

4. FEI Number: 20-1116903 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WIELGUS, ROBERT W 11 RESTON PLACE PALM COAST FL 32164	Name: KRYSTYNA SUPINSKI Street Address (P O Box Number is Not Acceptable): 25 LANSDOWNE LN. City: PALM COAST FL Zip Code: 32137

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: Krystyna M Supinski 4/3/2006
Signature, if person named is registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOMOLKA, JANE 69 WESTFIELD LANE PALM COAST FL 32164	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOZENA KRAJEWSKA-PIELARZ 21 RALEIGH DR. PALM COAST, FL 32164	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SOKOLSKI, DANIEL 45 WILLIAMS DRIVE PALM COAST FL 32164	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOKOLSKI, DANIEL 45 WILLIAMS DRIVE PALM COAST, FL 32164	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRAS KOSZYK-WIELGUS, DOROTA K 11 RESTON PLACE PALM COAST FL 32164	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ZBIGNIEW SUPINSKI 25 LANSDOWNE LN. PALM COAST, FL 32137	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MISZTAL, RENATA 13 FARRADAY LN PALM COAST FL 32164	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARGARET LUKASIEWICZ 228 LONDONDERY CIR. ORMOND BEACH, FL 32174	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WASZKIEWICZ, MARCIN 7 WAIMOUT PLACE PALM COAST FL 32164	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KRYSTYNA SUPINSKI 25 LANSDOWNE LN. PALM COAST, FL 32137	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRAS GERMANSKA, BARBARA 239 CORAL REEF CT N PALM COAST FL 32164	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRAS IWONA GUBALA 13 PANEI LN. PALM COAST FL 32164	☑ Change ☐ Addition

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

SIGNATURE: Krystyna M Supinski 4/3/2006 (386) 446-4926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #