## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23267

FILED Jan 18, 2012 Secretary of State

01/18/2012

Entity Name: POLISH LEGION OF AMERICAN VETERANS, U.S.A. DENNIS ORLOSKI POST #184, INC.

Current Principal Place of Business: New Principal Place of Business:

3852 PRIME PLACE 4616 DARLINGTON ROAD NEW PORT RICHEY, FL 34652 HOLIDAY, FL 34690

Current Mailing Address: New Mailing Address:

PO BOX 96

ELFERS, FL 34680

FEI Number: 51-0186682 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARRISON, EDWARD COMDR.

4408 WHITTON WAY

NEW PORT RICHEY, FL 34653 US

WOZNIAK, RALPH COMDR.

13103 CABRAL PLACE

RIVERVIEW, FL 33579 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: RALPH WOZNIAK

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

 Name:
 HRAPLA, FRANK
 VICE /C

 Address:
 6617 PINE WALK CT

 City-St-Zip:
 NEW PORT RICHEY, FL 34655

Title: T

Name: ROTH, LINDA TREAS.
Address: 3619 CAMBRIDGE STREET
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T

Name: BLAS, FRANK TRUSTEE
Address: 3864 LIGHTHOUSE WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

Title:

Name: O'LESKE, CHESTER TRUSTEE

Address: P.O. BOX96 City-St-Zip: ELFERS, FL 34680

Title:

Name: SMIECH, WILLIAM TRUSTEE Address: 4233 RIDGEFIELD AVE City-St-Zip: HOLIDAY, FL 34691

I hereby 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 all other like empowered.

SIGNATURE: RALPH WOZNIAK COMR 01/18/2012