## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N24247

FILED Mar 04, 2009 Secretary of State

Entity Name: POLISH SPACE COAST LODGE 3230 INC.

**Current Principal Place of Business: New Principal Place of Business:** 2701 GARDEN ST TITUSVILLE, FL 32796 US **Current Mailing Address: New Mailing Address:** 2701 GARDEN ST TITUSVILLE, FL 32796 US FEI Number: 51-0224504 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STADNIK, TEOFIL J 3422 ANGELICA STREET COCOA, FL 32926 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete STADNIK, TEOFIL J Name: Name: 3422 ANGELICA ST Address: Address: City-St-Zip: COCOA, FL 32926 City-St-Zip: Title: () Delete Title: 1VP (X) Change ( ) Addition Name: FARRELL, PHYLLIS Name: FARRELL, PHYLLIS Address: 1305 N. TROPICAL TR Address: 1305 N. TROPICAL TR City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 Title: () Delete Title: () Change () Addition ERMERINS, MARGARET Name: Name: Address: 2515 KEISER COURT Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: Title: FS ( ) Delete Title: () Change () Addition Name: KOLAND, HELEN Name: Address: 1368 NIMITZ CT Address: City-St-Zip: ROCKLEDGE, FL 329555151 City-St-Zip: Title: ( ) Delete Title: 2VP (X) Change ( ) Addition PIOTROWSKI, LEONARD PIOTROWSKI, LEONARD Name: Name: 135 MCNEELA DR 135 MCNEELA DR Address: Address: TITUSVILLE, FL 327963296 City-St-Zip: City-St-Zip: TITUSVILLE, FL 327963296 Title: () Delete Title: (X) Change ( ) Addition EAWACKI, BEVE NICKOLENKO, MARGE Name: Name: Address: 14315 WINGFOOT RD Address: 1450 THORNTON AVE ORLANDO, FL 32826 TITUSVILLE, FL 32780 City-St-Zip: 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: TEOFIL J. STADNIK P 03/04/2009