


MP

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 28 1996 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **N31712 (5)**  
 1. Corporation Name  
**POLISH AMERICAN SOCIAL CLUB OF BEVERLY HILLS, IN C.**



Principal Place of Business <b>PO BOX 640125 BEVERLY HILLS FL 34464-0125</b>	Mailing Address <b>PO BOX 640125 BEVERLY HILLS FL 34464-0125</b>
---	---

3. Date Incorporated or Qualified <b>04/14/1989</b>	3a. Date of Last Report <b>02/02/1995</b>
--	--

2. Principal Place of Business 21 <b>P.O.Box 640125</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>P.O.Box 640125</b> Suite, Apt. #, etc.
22 City & State <b>Beverly Hills, FL</b>	27 City & State <b>Beverly Hills, FL</b>
23 Zip <b>34464-0125</b>	24 Country <b>U.S.A.</b>
25 Zip <b>34464-0125</b>	28 Country <b>U.S.A.</b>

4. FEI Number <b>59-2965314</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**BRETT, H. JAMES  
 611 EAST PENNSYLVANIA AVENUE  
 DUNNELLON FL 32630**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR MACK, ED 3905 N. SEMINOLE PL CRYSTAL RIVER FL	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KLEIN, STEVE 68 W. SUGARBERRY LN BEVERLY HILLS FL 34465	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MIKUTEL, JOHN 111 GOLDEN TUFF CO BEVERLY HILLS FL 34465	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KATARYNIAK, MYRON 83 S OSCEOLA ST BEVERLY HILLS FL 34465	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHIPLEY, JEAN 6079 N SILVER PALM WAY BEVERLY HILLS FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STOFFEL, ELLA 45 REGINA BLVD BEVERLY HILLS FL 34465	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President Shipley, Jean 6079 N. Silver Palm Way Beverly Hills, FL 34465	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	1st Vice President Mazurek, Lorraine 425 Sugarmaple Lane Beverly Hills, FL 34465	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	2nd Vice President West, Margaret 2838 East New Haven St. Inverness, FL 34450	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Treasurer Supergan, Genevieve 1194 N. Lion Cub Pt. Lecanto, FL 34461	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Secretary Bandur, Bernice 399 W. Sugarmaple Ln. Beverly Hills, FL 34465	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Trustee Mikutel, John 111 Goldentuft Ct. Beverly Hills, FL 34465	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Genevieve Supergan Genevieve Supergan 2/21/96 (352)527-1448  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR0207 (12/95)