

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

DOCUMENT # N31712

1. Entity Name
POLISH AMERICAN SOCIAL CLUB OF BEVERLY HILLS, IN

05-25-2001 90311 001 ****61.25
 05-25-2001 90311 002 *****8.75

Principal Place of Business Mailing Address
 PO BOX 640125 PO BOX 640125
 BEVERLY HILLS FL 34464-0125 BEVERLY HILLS FL 34464-0125



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State BEVERLY HILLS FL City & State BEVERLY HILLS FL
 Zip 34464 Country CITRUS Zip 34464 Country CITRUS

4. FEI Number 59-2965314 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BRETT, H. JAMES
20093 E PENNSYLVANIA AVE
DUNNELLON FL 34432

7. Name and Address of New Registered Agent
 Name _____
 Street Address (P.O. Box Number Is Not Acceptable) _____
 City **FL** Zip Code _____

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.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JAZWIWSKI, HENRY S 7219 SW 115 TH LN OCALA FL 34478 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAZUREK, LORRAINE 425 SUGARMAPLE LANE BEVERLY HILLS FL 34465 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEMBKOWSKI, CHESTER J 84 W. ROYAL FERN PL BEVERLY HILLS FL 34465 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OTR LOPRESTI, MIKE 8 MONTANA ST. BEVERLY HILLS FL 34465 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR MIKUTEL, JOHN 111 GOLDEN TUFF CT. BEVERLY HILLS FL 34465 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP MALINCHAK, MAY 8540 S. W. 108TH ST. OCALA FL 34476 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MARYLOU WAARHOL 503 W. 108TH S. BARBOUR ST. BEVERLY HILLS, FL 34465 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE DEMKOWICZ, DOLORES 3773 N. HONEYLOCAST DR. BEVERLY HILLS, FL 34465 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALBERT J. HAYES 503 S. MURKIE ST. BEVERLY HILLS FL 34465 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FIRST VICE PRES. ZADROGA, BEVERLY 214 S. JACKSON ST BEVERLY HILLS, FL 34465 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **SIGNATURE REQUIRED** *Albert Hayes 627-3395* Date _____ Daytime Phone # _____

CR2E037 (10/00)