2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N42166

Entity Name: THE POLAND FOUNDATION, INC.

Current Principal Place of Business:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334172716

New Principal Place of Business:

Current Mailing Address:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334172716

New Mailing Address:

FEI Number: 65-0247912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WASCH, MICHELLE
4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

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:

Title:	P	( ) Delete
Name:	POLAND, PHYLLIS	
Address:	535 E. 86TH ST. APT. 6-A	
City-St-Zip:	NEW YORK, NY 10028	
Title:	T	( ) Delete
Name:	WASCH, MICHELLE	
Address:	4601 COMMUNITY	
City-St-Zip:	WEST PALM BEACH, FL 334172716	
Title:	VP	( ) Delete
Name:	KLEIN, JEFFREY L	
Address:	7905 TENNYSON COURT	
City-St-Zip:	BOCA RATON, FL 33496	
Title:	SD	( ) Delete
Name:	GREEN, BARBARA GORDON	
Address:	583 NORTH LAKE WAY	
City-St-Zip:	PALM BEACH, FL	
Title:	D	( ) Delete
Name:	NEWMAN, ALVIN	
Address:	6462 WOODTHRUSH CT	
City-St-Zip:	PALM, BEACH GARDENS, FL 33418	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELLE WASCH T 05/01/2006

Electronic Signature of Signing Officer or Director — Date