

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 22, 2008  
Secretary of State

DOCUMENT# N49417

Entity Name: POLONIA, INC.

**Current Principal Place of Business:**

4350 16 ST N  
ST PETERSBURG, FL 33707 US

**New Principal Place of Business:**

4350 16 ST N  
ST PETERSBURG, FL 33703 US

**Current Mailing Address:**

P.O. BOX 5951  
CLEARWATER, FL 33758

**New Mailing Address:**

FEI Number: 65-0342088      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RAKOCZY, STEFAN  
4350 16 ST N  
ST PETERSBURG, FL 33707 US

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

RAKOCZY, STEFAN  
4350 16 ST N  
ST PETERSBURG, FL 33703 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: \_\_\_\_\_

01/22/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RAKOCZY, STEFAN  
Address: 3700 17 AVE N  
City-St-Zip: ST PETERSBURG, FL 33713

Title: VD ( ) Delete  
Name: FORTUNSKI, JAN  
Address: 6112 2 ND STREET EAST A24  
City-St-Zip: ST.BEACH., FL 33706

Title: T ( ) Delete  
Name: WISNIEWSKI, ELZBIETA  
Address: 304 S HERCULES AVE #3  
City-St-Zip: CLEARWATER, FL 33765

Title: S ( ) Delete  
Name: KANIEWSKA, ALFREDA  
Address: 6111 2ND STREET, EAST A24  
City-St-Zip: ST PETE BEACH, FL 33706

Title: VD ( ) Delete  
Name: SIEPAK, LUDWIKA  
Address: 11700 CAPRI CIRCLE S, APT 3  
City-St-Zip: TREASURE ISLAND, FL 33706

**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 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: ELZBIETA WISNIEWSKI

T

01/22/2008

Electronic Signature of Signing Officer or Director

Date