# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Jun 02, 2006 8:00 am**
**Secretary of State**
04-27-2006 90154 033 ****70.00

DOCUMENT # N92000000761

1. Entity Name

ST. MARY'S PARISH OF THE POLISH NATIONAL CATHOLIC CHURCH, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 2175 PINELLAS PT. DRIVE S.<br>ST. PETERSBURG FL 33712 | 2175 PINELLAS PT. DRIVE S.<br>ST. PETERSBURG FL 33712 |

00017033

1st MOORE CR2E037 (10/05)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| SIELCHAN, JOHN REV<br>2175 PINELLAS PT DR SOUTH<br>ST. PETERSBURG FL 33712 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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. I am familiar with, and accept the obligations of registered agent

SIGNATURE Rev. John Sielchan Apr 17/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstated) DATE

**FILE NOW: FEE IS $61.25**
**Due By May 1, 2006**

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

**Make Check Payable to Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | C<br>KOWALSKI, GRAZYNA<br>3719 COATS RD<br>ZEPHYRHILLS FL 33541 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Chairman<br>Gee Mikolajczak<br>1037 35 Ave. North<br>St. Petersburg, FL. 33704 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>GROSZEK, HALINA<br>7242 RIVERBANK DR.<br>NEW PORT RICHEY FL 34655 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Rec. Sec.<br>Elizabeth Lukas<br>3624 36 Str. North<br>St. Petersburg, FL. 33713 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>PARKER, BILL<br>5222 4TH STREET N, #309<br>SAINT PETERSBURG FL 33703 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Fin. Sec.<br>Susan Mikolajczak<br>1037 35 Ave North<br>St. Petersburg FL. 33704 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>NUJIKAHCZAJ, SUSAB<br>1037 35 AVENUE NORTH<br>SAINT PETERSBURG FL 33704 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Sophie Gasztold<br>4610 Hurcross Ln.<br>New Port Richey, FL. 34653 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>ZDZISHAW, MIKOLAJCZAK<br>1037 35 AVENUE NORTH<br>SAINT PETERSBURG FL 33704 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Adele Cisniewicz<br>1950-58 Ave N. R. 24<br>St. Petersburg, FL. 33714 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:** Adele M. Cisniewicz Director 5/26/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #