## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

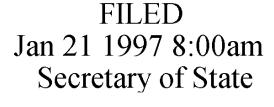
DOCUMENT #

N94000004658 (0)

POLISH NATIONAL ALLIANCE LODGE #3216, INC.

Principal Place of Business
12814 FORESTAGE CIR ORLANDO FL 32828-8608

Mailing Address





12814 FORESTA ORIANDO FL 3		12814 FORESTAGE CIR ORLANDO FL 32828						
12814 FORESTEDGE CR O S			SAME	<u>.</u>	3. Date Incorporated or Qualified	3. Date Incorporated or Qualified 3a. Date of Last Report 09/19/1994 01/24/1996		
2. Principal Pla	ace of Business	2a. Mailing Address	<i>&gt;/(</i> 1000	, 	4. FEI Number	_ <del></del>	applied For	
21	dec of Egamous	26			51-0143603	<del></del>	lot Applicable	
Suite, Apt. 6	#, elc.	Suite, Apt. #, etc.	<del></del>			eo 75	Additional	
22		27		····	5. Certificate of Status Desired	Fee P	Required	
City & State  City & State  City & State  City & State  City & State				FC 6. Election Campaign Financing Trust Fund Contribution		· ·	\$5.00 May Be Added to Fees	
Zip 328 a	28 Country ORANGE	Zip	Countr	ANG	8. This corporation has liability for Florida Statutes	intangible tax under : Yes	s. 199.032,	
	9. Name and Address of Current R	egistered Agent		<del>,</del>	10. Name and Address of New Re	gistered Agent		
			81	Name			l	
DADROWSKI, EDWARD J				82 Street Address (P.O. Box Number is Not Acceptable)				
1155 KERWOOD CIRCLE								
12814 F	ORESTAGE CIR.		83				l	
ORLANDO FL 32828				City		FL 85 Zip	Code	
11 Pursuant t	to the provisions of Sections #11 0502 a	nd 617 1508 Florida Stati	ites the abov	e-named	cornoration submits this statement for the r		its registered	
office or re agent. I ar SIGNATURE		Florida. Such change was ns of, Section 617.0503, F	authorized b lorida Statute	y the corp s.	corporation submits this statement for the p poration's board of directors. I hereby accept	of the appointment as	s registered	
SIGIVATORIE	Signature, typed or printed name of registered agent a		TE: Registered Ag	ent signature	required when reinstating)	DATE		
12.	OFFICERS AND E		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME (	sitak, john		1.2 NAME	i				
STREET ADDRESS	2406 EUSTON ROAD		1.3 STAEE	ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY -	ST-ZIP				
TOTLE	D	<b>▼</b> DELETE	2.1 TITLE	İ	MAKIA SUDNICKI 3240 PINTO DR. KISSIMMEE,FC 34746	L Change	X Addition	
NAME	misiur, mathew		2.2 NAME		3240 PINTO DR.		l	
STREET ADDRESS	5143 LAZY LAKE CIRCLE		2.3 STAEE	ADDRESS	KISSIMMEE FL 34746	. 4800		
CITY-ST-ZIP	ORLANDO FL 32821		2.4 CITY-	ST-ZIP				
TITLE	D	☐ DELETE	3.1 TITLE			L. Change	Addition	
NAME	odahowski, william j		3.2 NAME				I	
STREET ADDRESS	1155 KERWOOD CIRCLE		3.3 STREE	ADDRESS				
CITY-ST-ZIP	OVIEDO FL		3.4. CITY-	ST-ZIP				
TITLE	D	DELETE	4.1 TITLE			☐ Change	Addition	
NAME	ODAHOWSKI, MARY JO		4. 2 NAME					
STREET ADDRESS	1155 KERWOOD CIR		4.3 STREE	ADDRESS				
CITY-ST-ZIP	OVIEDO FL		4.4 CITY-	ST-ZIP			,	
TITLE	Ď	DELETE	5.1 TITLE			Change	Addition	
NAME	HENRYKA, DB DEEB		5.2 NAME					
STREET ADDRESS	14119 DRUID RD.		5.3 STREE	ADDRESS				
CITY-ST-ZIP	MAITLAND FL		5.4 CHY-	ST - ZIP				
TITLE	VD	DELETE	6.1 TITLE			☐ Change	Addition	
NAME	SKOWRON, WALTER		6.2 NAME	1				
STREET ADDRESS	2718 ENVIRONS BLVD.			ADDRESS				
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-	1				
		ith this filing does not qua			tated in Section 119.07(3)(i), Florida Statute	s. I further certify the	it the	

I am an officer or director of the corporation or the reference and that my signature shall have the same legal effect as if made under or a man officer or director of the corporation or the reference or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 5 if changed, or on an attachment with an address.