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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 N95000004201 (8) DOCUMENT #
1. Corporation Name

DOLICH CENTED OF JOHN PAHIL II INC

## **FILED** May 08 1997 8:00am Secretary of State

Sulfo, Apt. #, etc.	POLISH CENTER OF JOHN FAUL II, INO.											
CLEARWATER FI. 34615  2. Principal Place of Business 2. Princi	Principal Plac	ce of Business	Mailing	Address				i idanier dia idan dilli adili adili	18141 88(1) <del>4</del> 8	414 MIDIO 15#H	. KB101 1181 1681	
2. Principal Place of Business   2a. Maling Address   2b. Maling Address   2a. Maling Address   2b. Maling Address												
Solid Apt #, occ   Solid Apt #, occ   Solid Apt #, etc.   Solid								3. Date incorporated or Qualified 09/01/1995	<b>3a</b> . Da	05/01/1	3eport <b>996</b>	
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.	· ·	Place of Business	<b> </b>	ng Address				4. FEI Number 59-3335866		<del></del>	, ·	]
Cay & State  28 29 20 Country 29 20 Country 20 20 Country 20 20 20 Country 20 20 20 20 20 20 20 20 20 20 20 20 20	Suite, Apt	. #, etc.	Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	1
2-p   Country   2-p   Countr	City & Sta	te		& State		•••••		Election Campaign Financing		\$5.00	May Be	1
9. Name and Address of Current Registered Agent  WORDEC, EUGENE 1182 FAY AVE LAROO FL 34841  11. Pursuant to the provisions of Sections \$17,000 and \$17,1508. Florids Stetutes, the aboven-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, an itemiate with, and accept the obligations of, Section 617,6508, florids Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS.  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS.  15. ITIME  16. VID.  17. ITIME  17. OFFICERS AND DIRECTORS.  18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  11. STREET ADDRESS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  11. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS.  11. STREET ADDRESS.  12. STRE	23				0							Į
WORDBEC, EUGENE 1182 FAY AVE. LARGO FI. 34641  11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Systems types periods have advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and are interesting to the corporation's board of directors. I hereby accept the appointment as registered agent, and are interesting to the corporation's board of directors. I hereby accept the appointment as registered agent, and are interesting to the corporation's board of directors. I hereby accept the appointment as registered agent, and are altered to purpose a prince types periods have a general and the florida Statutes.  SIGNATURE Systems types to periods have a general and the flagstation by the corporation's board of directors. I hereby accept the appointment as registered agent, and a corporation submits this statement for the purpose of changing its registered agent.  BATTER AGENT AGEN	24 Zip	25	29	, ·							s. 199.032,	
WORDBEC, EUGENE 1182 FAY AVE. LARGO FL 34641  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent an imminist with, and eccept the obligations of Section 617.0507, froid Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of Section 617.0507 froid Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL 100NSEC, EUGENE  1182 FAY AVE.  1.3 SIRET ADDRESS  1.3 SIRET ADDRESS  1.3 SIRET ADDRESS  1.4 CITY-ST-2P  LARGO FL 34640  1.4 CITY-ST-2P  LARGO FL 34640  1.4 CITY-ST-2P  LARGO FL 34643  1.5 SIRET ADDRESS  1.6 SD  1.7 SI-2P  1.		9. Name and Address of Curr	rent Registered	Agent				10. Name and Address of New Ret	lstered A	gent		]
1182 FAY AVE.  LARGO FL 34641  14. Pursuant to the provisions of Sections 617.0502 and 617.1506. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and mark and agent agent agent and mit in a directors.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  WORDSEC, EUGENE  1182 FAY AVE.  128 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1182 FAY AVE.  128 INSET ADDRESS  1182 FAY AVE.  129 INSET ADDRESS  1182 FAY AVE.  129 INSET ADDRESS  1182 FAY AVE.  120 INSTAT AVE.  120 INSTAT AVE.  121 INSTAT AVE.  121 INSTAT AVE.  122 INSET ADDRESS  123 STRET ADDRESS  124 INSTAT AVE.  125 INSTAT AVE.  126 INSTAT AVE.  127 INSTAT AVE.  128 INSET ADDRESS  129 INSTAT AVE.  129 INSTAT AVE.  120 INSTAT AVE.  120 INSTAT AVE.  120 INSTAT AVE.  120 INSTAT AVE.  121 INSTAT AVE.  121 INSTAT AVE.  122 INSTAT AVE.  123 INSTAT AVE.  124 INSTAT AVE.  125 INSTAT AVE.  126 INSTAT AVE.  126 INSTAT AVE.  127 INSTAT AVE.  128 INSTAT AVE.  129 INSTAT AVE.  120 I						B1	Name	•				ı
LARGO FL 34641    Same					1	32	Street A	ddress (P.O. Box Number is Not Acceptab	le)			1
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617.0503, Florids Statutes.  SIGNATURE  Signature types or primed name of registered application. PATE Registered Agent age	LARGO	FL 34641			آ	B3						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature typics or printed name of registered agent and list of applicable  PO  INCITE Registered Agent aginetics registered when relineating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  PO  INCITE Registered Agent aginetics registered when relineating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  PO  INCITE Registered Agent aginetics registered when relineating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  PO  INCITE Registered depart aginetics registered when relineating)  DATE  12. OFFICERS AND DIRECTORS  118. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  PO  INTERPOPER AGENT AGENTS  118. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITHE  PO  INTERPOPER AGENT AGENTS  118. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTERPOPER AGENTS  INTERPOPER AGE					1	94	City		FL	<b>85</b> Zip	Code	
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SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  PD  DELETE  1.1 TITLE  PO  DELETE  1.1 TITLE  PO  DELETE  1.1 TITLE  PO  DELETE  1.2 NAME  SIRREET ADDRESS  1.4 CITY-ST-ZP  LARGO FL 34641  LARGO FL 34641  DELETE  2.1 TITLE  VD  NAME  WANK, KRZYSZTOF  SIRREET ADDRESS  COTY-ST-ZP  LARGO FL 34640  2.4 CITY-ST-ZP  LARGO FL 34640  2.4 CITY-ST-ZP  LARGO FL 34640  1.5 SIRREET ADDRESS  SIRREET ADDRESS  COTY-ST-ZP  LARGO FL 34640  2.4 CITY-ST-ZP  LARGO FL 34643  3.5 SIRREET ADDRESS  COTY-ST-ZP  LARGO FL 34643  3.5 SIRREET ADDRESS  SO  DELETE  3.1 TITLE  TD  DELETE  3.1 TITLE  TD  DELETE  3.1 TITLE  TD  DELETE  4.1 TITLE  TD  DELETE  4.1 TITLE  DELETE  4.2 NAME  4.2 NAME  5.7 24 10.3 TOC 4U.E., TJ.  7.1 NAME  SIRREET ADDRESS  SEMINOLE FL 34643  4.4 CITY-ST-ZP  SEMINOLE FL 34643  SIRREET ADDRESS  SO TOR HAPOUR KOVEL DR.  SIRREET ADDRESS  SO TOR HAPOUR MADE  SIRREET ADDRESS  SO TOR HAPOUR	office or agent. La	registered agent, or both, in the Sta am familiar with, and accept the ob	ate of Florida. Su ligations of, Sec	ich change was tion 617.0503, Fl	authorized orida Statu	by i tes.	the corpo	pration's board of directors. I hereby accep	t the appo	ointment as	s registered	
TILE PO   DELETE   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   DELETE   1.1 TITLE   DELETE   1.2 NAME	1	$\epsilon_{ij} = 0$		,								1
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PRZEPIERZYNSKI, JANINA M  STREET ADDRESS 3632 BENSON AVE. NORTH  CITY-ST-ZIP ST. PETERSBURG FL 33713  DEPOBLETE  BRZOSTEK, YOLANTA SIREET ADDRESS 3927 ORCHARD HILL CIR.  5.2 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CLE 4 RWATE 2  CLE 5 RWATE 2  CLE 6 RWATE 2  CLE 7 RWATE 2  CLE 6 RWATE 2  CLE 6 RWATE 2  CLE 7 RWATE 2  CLE 7 RWATE 2  CLE 6 RWATE 2  CLE 7 RW		·			_					T 26		-
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STREET ADDRESS 3927 ORCHARD HILL CIR. 6.3 STREET ADDRESS 9310 MARK TWAIN IN	CHTY-ST-ZIP	3632 BENSON AVE. NORT ST. PETERSBURG FL 337	TH	TOTOETE	5.3 STR 5.4 CITY	EET A	ADDRESS - Zip	3076 KAPOK KOVE CLEARWATER FL	340	519	Addition	
The state of the s	CHTY-ST-ZIP TITLE	3832 BENSON AVE. NORT ST. PETERSBURG FL 3371 D	TH	DELETE	5.3 STR 5.4 CITY 6.1 TITL	EET A Y-SY-	ADDRESS - Zip	3076 KAPOK KOVE CLEARWATER PL D.	340 340	519	Addition	
	CHY-SI-ZIP TITLE NAME	3632 BENSON AVE. NORT ST. PETERSBURG FL 3371 D BRZOSTEK, YOLANTA	TH 13	DELETE	5.3 STR 5.4 CITY 6.1 TITL 6.2 NAA	EET A Y-SY- E ME	ADORESS - ZIP	BOTG KAPOK KOUR CLEARWATER FL D. KUBICKI STANISCA 9810 MARK TWAIN	340 340 1WA	Change	_	

14. I do 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 apoual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: