

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004201

FILED
Apr 28, 2009
Secretary of State

Entity Name: POLISH CENTER OF JOHN PAUL II, INC.

Current Principal Place of Business:

1521 NORTH SATURN AVE.
CLEARWATER, FL 33758

New Principal Place of Business:

Current Mailing Address:

1521 NORTH SATURN AVE.
CLEARWATER, FL 33758

New Mailing Address:

1521 NORTH SATURN AVE.
CLEARWATER, FL 33755

FEI Number: 59-3335866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAZNOWSKI, ROMAN
1014 OSPRAY CRT
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

ZASADNA, JOLANTA J PREZ
3816 104TH AVE N
CLEARWATER, FL 34672 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: JOKLANTA ZASADNA

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: CHABEREK, ELZBIETA
Address: 235 28TH AVENUE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VD () Delete
Name: STANISLAWA, KUBICKA
Address: 9310 MARK TWAIN LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: VD () Delete
Name: GLOWACKI, RICHARD T
Address: 224 ELMWOOD CIR
City-St-Zip: SEMINOLE, FL 33777

Title: SP () Delete
Name: KARWOSKI, ZYGMUNT
Address: 1160 BLUFFS CIR
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: KUBICKA, STANISLAWA
Address: 2464 AUSTRALIA E , APT.42
City-St-Zip: CLEARWATER, FL 33763

Title: VP (X) Change () Addition
Name: GAJDECZKA, FRANEK T
Address: 5080 LAKE VALENCIA BLVD
City-St-Zip: PALM HARBOR, FL 34684

Title: SEC (X) Change () Addition
Name: BOK-BRYJ, IRENA
Address: 1250 S.PINELLAS AVE, APT.# 114
City-St-Zip: TARPON SPRINGS, FL 34689

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: JOLANTA ZASADNA

PREZ

04/28/2009

Electronic Signature of Signing Officer or Director

Date