

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004201

FILED
Apr 24, 2012
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 33755

New Mailing Address:

FEI Number: 59-3335866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOWACKI, ANDREW PRES
851 LANTERN WAY
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

KAWCZAK, STANLEY PRES
9667 108 AVE NORTH
LARGO, FL 33773 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: STANLEY KAWCZAK

04/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: KAWCZAK, STANLEY PRES.
Address: 9667 108 AVE NORTH
City-St-Zip: LARGO, FL 33773

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

Title: T
Name: OSTROWSKI, ILONA M
Address: 3131 SWAN LN
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP
Name: HUBSKA, ATONINA
Address: 11476 62ND AVE. N.
City-St-Zip: SEMINOLE, FL 33772

Title: S
Name: TOMASIK, EWA
Address: 1424 SEAGULL DR. APT.112
City-St-Zip: PALM HARBOR, FL 34685

Title: D
Name: DABROWSKI, WIOLETTA
Address: 93 BAYWOOD AVE
City-St-Zip: CLEARWATER, FL 33765

I hereby 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 all other like empowered.

SIGNATURE: STANLEY KAWCZAK

PD

04/24/2012

Electronic Signature of Signing Officer or Director

Date