

FILE NOW: FILING FEE IS \$61.25

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Mar 09 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000006619 (7)**

1. Corporation Name

**HOLY CROSS PARISH, POLISH NATIONAL CATHOLIC CHURCH, INC.**

Principal Place of Business

Mailing Address

**333 N.W. 30TH STREET  
MIAMI FL 33127**

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MIAMI FL 33127**



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
<b>21</b>	<b>26</b>	<b>11/24/1997</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
<b>22</b>	<b>27</b>	<b>59-2349228</b>
City & State	City & State	Applied For
<b>23</b>	<b>28</b>	Not Applicable
Zip	Country	5. Certificate of Status Desired
<b>24</b>	<b>25</b>	<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
		6. Election Campaign Financing
		Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
		7. Is this nonprofit corporation a homeowners association?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
		<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KULATZ, CONRAD S ESQ.  
633 SE 3RD AVE.  
SUITE 4R  
FORT LAUDERDALE FL 33301**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

**FL**

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 office or 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>CD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NEMKOVICH, ROBERT M REV.</b>	1.2 NAME	
STREET ADDRESS	<b>920 N. NORTHWEST HIGHWAY</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PARK RIDGE IL 60068-2358</b>	1.4 CITY-ST-ZIP	
TITLE	<b>STD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SOBIECHOWSKI, PAUL REV.</b>	2.2 NAME	
STREET ADDRESS	<b>5401 S.W. 64TH AVENUE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>DAVIE FL 33324</b>	2.4 CITY-ST-ZIP	
TITLE	<b>VCD</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MAYCAN, ROBERT R</b>	3.2 NAME	
STREET ADDRESS	<b>1425 SOUTH CRESCENT AVE.</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PARK RIDGE IL 60068</b>	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 annual 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:

*Rev. Paul Sobiechowski, Secretary*

*Jan. 20, 1998 (954) 581-5293*

CR2E037 (10/97)