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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000004051

1. Corporation Name

SENIOR CITIZEN POLISH CLUB, INC.

Principal Place of Business
1521 N. SATURN AVENUE
CLEARWATER FL 34618

Mailing Address
2793 SCOBEE DRIVE
PALM HARBOR FL 34683



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 P.O. Box 7852
Suite, Apt. #, etc.

27 City & State

28 Clearwater, Florida
29 33758 30 Pinellas

3. Date Incorporated or Qualified

07/10/1998

4. FEI Number

(EIN) #59-3532692

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

DOKTORCZYK, CHESTER
2793 SCOBEE DRIVE
PALM HARBOR FL 34683-7214

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

T
NAME HELEN KOLANKO
STREET ADDRESS 5725 12th avenue N. apt806
CITY-ST-ZIP ST. PETERSBURG 33710

T
NAME EDWARD ROGALSKI
STREET ADDRESS 2891 ARMADILLO DRIVE
CITY-ST-ZIP PALM HARBOR, FL. 34683

T
NAME CHESTER DOKTORCZYK
STREET ADDRESS 2793 SCOBEE DRIVE
CITY-ST-ZIP PALM HARBOR, FL. 34683

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D
NAME Walter Abramowicz
STREET ADDRESS 25 37 Blackwood Circle
CITY-ST-ZIP Clearwater, Florida 33763

D
NAME Dr. Bronislaw Chapinski
STREET ADDRESS 4300 22nd Street N.
CITY-ST-ZIP Saint Petersburg, Florida 33714

D
NAME LEOPOLD OSSINSKI
STREET ADDRESS 929 S. DAKOTA AVENUE
CITY-ST-ZIP TAMPA, FL. (33) 33606

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

Chester Doktorczyk 2/11/99

(727) 736-0372

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #