2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2003 8:00 am
Secretary of State
06-04-2003 90095 020 ****75.00

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1. Entity Name

~~SENIOR CITIZEN POLISH CLUB, INC.~~
Polish American Seniors Association, Inc.

Principal Place of Business	Mailing Address
4350 16TH STREET NORTH SAINT PETERSBURG FL 33703	P.O. BOX 7852 CLEARWATER FL 33758

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3532692 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROGALSKI, EDWARD 2891 ARMADILLO DRIVE PALM HARBOR FL 34683	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☑ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SIMONS, IRENA K 13866 84TH TERRACE N SEMINOLE FL 33776	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROGALSKI, EDWARD 2891 ARMADILLO DR. PALM HARBOR FL 34683	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD STASIOW, STANLEY 6901 32ND AVENUE NORTH SAINT PETERSBURG FL 33710	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ABRAMOWICZ, WALTER 2462 BRAZILLA DRIVE APT 54 CLEARWATER FL 33763	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/Financial Administrator Abramowicz, Walter 2462 Brazilla Dr. Apt 54 Clearwater FL. 33763	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HALIN, KUBIK 6441 82ND AVENUE NORTH PINELLAS PARK FL 34665	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/Secretary Kubik, Halina 6441-82nd Ave. N. Pinellas Park FL. 34665	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/Chairman of the Board of Directors Hyzlak, Wladislaw 8. 11082-56th Ave. N. Seminole, FL. 33772	☐ Change ☑ Addition

CR2E037 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Irena K. Simons Irena K. Simons 3/21/03 (727) 399-1711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #