

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703186

**FILED**  
**Feb 11, 2016**  
**Secretary of State**  
**CC0866421374**

**Entity Name:** ALBIN POLASEK FOUNDATION INC.

**Current Principal Place of Business:**

633 OSCEOLA AVENUE  
WINTER PARK, FL 32789

**Current Mailing Address:**

633 OSCEOLA AVENUE  
WINTER PARK, FL 32789 US

**FEI Number:** 59-1102352

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHARPSTEIN, ROBERT  
2628 W. FAIRBANKS AVE.  
WINTER PARK, FL 32789 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	S	Title	PRESIDENT
Name	DUDA, JUDITH	Name	SHARPSTEIN, ROBERT
Address	1721 REBEL RUN	Address	2628 W. FAIRBANKS AVE.
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	WINTER PARK FL 32789
Title	VP	Title	TREASURER
Name	VERNON-DEVLIN, SUSAN	Name	WALDA, LAURA
Address	3821 ORANGE LAKE DRIVE	Address	1791 SHILOH LANE
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	WINTER PARK FL 32789
Title	EXECUTIVE DIRECTOR		
Name	KOMANSKI, DEBBIE		
Address	633 OSCEOLA AVENUE		
City-State-Zip:	WINTER PARK FL 32789		

*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:** DEBBIE KOMANSKI

**EXECUTIVE DIRECTOR**

**02/11/2016**

Electronic Signature of Signing Officer/Director Detail

Date