

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763344

Entity Name: AMERICAN INSTITUTE OF POLISH CULTURE - PINELLAS COUNTY, INC.**Current Principal Place of Business:**9190 49TH STREET NO
PINELLAS PARK, FL 33782**Current Mailing Address:**9190 49TH STREET NO
PINELLAS PARK, FL 33782 US**FEI Number: 59-2181830****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SKIBICKI, EVA
9190 49TH STREET NO
PINELLAS PARK, FL 33782 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: EVA SKIBICKI****01/22/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	SKIBICKI, EVA
Address	2327 CAMPBELL RD
City-State-Zip:	CLEARWATER FL 33765
Title	TREASURER
Name	STOBICKI, ALEKSANDRA
Address	17720 LEE AVE
City-State-Zip:	REDINGTON SHORES FL 33708
Title	DIRECTOR
Name	SAWA, WOJTEK
Address	2626 OAKMERE LANE
City-State-Zip:	SARASOTA FL 34231
Title	DIRECTOR
Name	ZASADNA, JOLANTA
Address	3816 104TH AVE N
City-State-Zip:	CLEARWATER FL 33762-5471

Title	VP
Name	CZKWIANIANC, GEORGE
Address	5113 TOWN & COUNTRY BLVD
City-State-Zip:	TAMPA FL 33677
Title	DIRECTOR
Name	KOLANKO, HANNA
Address	255 CAPRI CIRCLE N. 38
City-State-Zip:	TREASURE ISLAND FL 33706
Title	SECRETARY
Name	MARKUT, KRYSZYNA
Address	1208 S DUNCAN AVE
City-State-Zip:	CLEARWATER FL 33756
Title	DIRECTOR
Name	NOWAKOWSKI, MARIOLA
Address	8934 ST ANDREWS DR
City-State-Zip:	SEMINOLE FL 33777-4518

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: EVA SKIBICKI**PRESIDENT****01/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date