2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001583

Entity Name: THE KOSCIUSZKO FOUNDATION INC

FILED Apr 06, 2009 Secretary of State

	THE RECEIPEZINE FEBRUARY,		
Current Principal Place of Business:		New Principal Place of Business:	
15 E 65 ST NEW YOR	REET K, NY 10065		
Current M	ailing Address:	New Mailing Address:	
15 E 65 ST NEW YOR	REET K, NY 10065		
FEI Number:	13-1628179 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and	Address of Current Registered Agent	Name and Address of New Registered Agent:	
	VICES INC CUTIVE PARK DR SUITE 4 FL 33331 US		
	named entity submits this statement for the of Florida.	ne purpose of changing its registered office or registered agent, or both,	
SIGNATUR	RE:		
	Electronic Signature of Registered	Agent Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () Delete SULIMIRSKI, WITOLD S 15 E 65 STREET NEW YORK, NY 10065	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VC () Delete GROMADA, THADDEUS V 15 E 65 STREET NEW YORK, NY 10065	Title: VC (X) Change () Addition Name: NARESKI, WILLIAM Address: 15 E 65 STREET City-St-Zip: NEW YORK, NY 10065	
Title: Name: Address: City-St-Zip:	P () Delete GORE, JOSEPH E ESQ 15 E 65 STREET NEW YORK, NY 10065	Title: P (X) Change () Addition Name: STOROZYNSKI, ALEX Address: 15 E 65 STREET City-St-Zip: NEW YORK, NY 10065	
Title: Name: Address: City-St-Zip:	VP () Delete JANIAK, MARYLA 15 E 65 STREET NEW YORK, NY 10065	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	S () Delete TYSZKA, HELEN M 15 E 65 STREET NEW YORK, NY 10065	Title: S (X) Change () Addition Name: WALENTOWICZ, HENRY ESQ. Address: 15 E 65 STREET City-St-Zip: NEW YORK, NY 10065	
Title: Name: Address: City-St-Zip:	T () Delete PIERCHALSKI, RICK 15 E 65 STREET NEW YORK, NY 10065	Title: () Change () Addition Name: Address: City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALEX STOROZYNSKI PRES 04/06/2009