

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747528

FILED
Jan 04, 2012
Secretary of State

Entity Name: LATVIAN ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

903 WALNUT TERRACE
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

903 WALNUT TERRACE
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 59-1918063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUGS, ANDREJS
903 WALNUT TERRACE
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: OZOLS,, GUNARS
Address: 61 SW SOUTH RIVER DRIVE #201
City-St-Zip: STUART, FL 34997

Title: T
Name: JUGS, ANDREJS
Address: 903 WALNUT TERRACE
City-St-Zip: BOCA RATON, FL 33486

Title: S
Name: ZUROVSKIS, MARGA
Address: 333 TACOMA LANE
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: VM
Name: VENTS,, JANIS
Address: 1427 E. HILLSBORO BLVD. # 625
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: A
Name: BRENDE, DZIDRE
Address: 2023 SW 17 AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D
Name: KRASTS, ELGA
Address: 5245 NW 58 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067

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: ANDREJS JUGS

TREA

01/04/2012

Electronic Signature of Signing Officer or Director

Date