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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N92000000040

1. Corporation Name
MANGO VILLAS HOMEOWNERS ASSOCIATION, INC.

470673 - 90046 - 36

Principal Place of Business	Mailing Address
324 W. PINE STREET STE 11 LANTANA FL 33462 US	324 W. PINE STREET STE 11 LANTANA FL 33462 US

2. Principal Place of Business
21 326 W. Pine Street
22 Suite, Apt. #, etc. 16
23 City & State Lantana Florida
24 Zip 33462 25 Country US

2a. Mailing Address
26 326 W. Pine Street
27 Suite, Apt. #, etc. 16
28 City & State Lantana Florida
29 Zip 33462 30 Country US

3. Date Incorporated or Qualifed 10/26/1992

4. FEI Number 65-0398827 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

KUMMALA KALERVO
531 SO LAKESIDE DRIVE
LAKE WORTH FL 33460

10. Name and Address of New Registered Agent

81 Name Heinonen Pasi
82 Street Address (P.O. Box Number is Not Acceptable) 326 W. Pine Street # 18
83
84 City Lantana FL 85 Zip Code 33462

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Pasi Heinonen President 4/28/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KUMMALA, KALERVO 531 S LAKESIDE DRIVE LAKE WORTH FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P Pasi Heinonen 326 W. Pine Street # 18 Lantana FL 33462	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LATVA, KOKKO P 326 W PINE ST, #16 LANTANA FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Jukka Seppänen 324 W. Pine Street # 12 Lantana FL 33462	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ERKKI, KOSKI 326 W PINE ST, #20 LANATANA FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4. CITY-ST-ZIP	T Heeri Lehtinen 326 W. Pine Street # 16 Lantana FL 33462	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VIULUND, SAURI 324 WEST PINE STREET LANTANA FL 33462	☐ DELETE	4.1 TITLE / 4. 2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Sakri Viklund 324 W. Pine St. # 15 Lantana FL 33462	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~~SIGNATURE REQUIRED~~ Pasi Heinonen 4/28/99 (561) 308-0528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #