

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90027 012 ****61.25

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DOCUMENT # 718756

1. Corporation Name

FINNISH WAR VETERANS IN FLORIDA, INC.

Principal Place of Business

30 SOUTH PALMWAY
30 SOUTH PALMWAY
LAKE WORTH FL 33460
US

Mailing Address

P.O. BOX 83
LAKE WORTH FL 33460
US



2. Principal Place of Business

21 Finland House

Suite, Apt. #, etc.

22 301 West Central Blvd.

City & State

23 Lantana, Florida

Zip

24 33462

Country

25 PB

2a. Mailing Address

26 P.O. Box 83

Suite, Apt. #, etc.

27 N/A

City & State

28 Lake Worth, Florida

Zip

29 33460

Country

30 PB

3. Date Incorporated or Qualified

06/25/1970

4. FEI Number

59-2365991

Applied For

Not Applicable

5. Certificate 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

CARLSON, LEO
2769 S GARDEN DR
APT 310
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

81 Name

Bert M. Hamlin

82 Street Address (P.O. Box Number is Not Acceptable)

83 2562 No. Garden Dr. Bldg. 7, #204 Lake Worth

84 City

Lake Worth

FL

85 Zip Code
33461

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

Bert M. Hamlin

Bert Hamlin, President/Director

Feb. 13, 1999.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME KESKITALO, LIISA
STREET ADDRESS 1238 LACOSTA CIRCLE
CITY-ST-ZIP LANTANA FL

TITLE PD ☒ DELETE

NAME CARLSON, LEO
STREET ADDRESS 2769 S GARDEN DR. APT 310
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE S ☐ DELETE

NAME MINNA, VILEN
STREET ADDRESS 411 NORTH "B" STREET
CITY-ST-ZIP LAKE WORTH FL

TITLE TD ☐ DELETE

NAME LEISIO, REINO
STREET ADDRESS 1341 FLAMINGO DR
CITY-ST-ZIP LANTANA FL

TITLE VPD ☒ DELETE

NAME KORBY, ERKKI
STREET ADDRESS 896 NORTH FEDERAL HWY, #427
CITY-ST-ZIP LANTANA FL

TITLE D ☐ DELETE

NAME LUKKARI, PAAVO
STREET ADDRESS WYNNDALE WAY
CITY-ST-ZIP LANTANA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Brita Piirainen
1.3 STREET ADDRESS 2724 N. Garden Drive, Apt. 204
1.4 CITY-ST-ZIP Lake Worth, FL 33461.

2.1 TITLE PD ☒ Change ☐ Addition

2.2 NAME Bert M. Hamlin
2.3 STREET ADDRESS 2562 No. Garden Dr. Bldg. 7, #204
2.4 CITY-ST-ZIP Lake Worth, FL 33461.

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME VPD
5.3 STREET ADDRESS Carlson, Leo
5.4 CITY-ST-ZIP 2769 S. Garden Dr. Apt. 310
Lake Worth, FL 33461

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Bert M. Hamlin

SIGNATURE REQUIRED

Feb. 13/99. - 641-5321.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)