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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 719481

1. Corporation Name

CASA BELLA CONDOMINIUM ASSOCIATION INC.

Principal Place of Business

**940 RIDGE ROAD
LANTANA FL 33462**

Mailing Address

**701 N 7TH STREET
LANTANA FL 33462**



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
10/12/1970

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
65-0011164

Applied For
Not Applicable

22

27

City & State

City & State

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

23

28

Zip Country

Zip Country

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

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HAKAMAA, IRMA
701 N 7TH STREET
LANTANA FL 33462**

81 Name **HAKAMAA, IRMA**

82 Street Address (P.O. Box Number is Not Acceptable)
701 N 7TH ST

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

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 **VD** ☐ DELETE
NAME **HAKAMAA, ANTTI**
STREET ADDRESS **701 N 7TH STREET**
CITY-ST-ZIP **LANTANA FL 33462**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **CPD** ☒ DELETE
NAME **AARI, RAIMO**
STREET ADDRESS **940 RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **STD** ☐ DELETE
NAME **HAKAMAA, IRMA**
STREET ADDRESS **701 N 7TH STREET**
CITY-ST-ZIP **LANTANA FL 33462**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **TD** ☒ DELETE
NAME **AARI, LEENA**
STREET ADDRESS **940 RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **TD TUSA JUMANI**
4.3 STREET ADDRESS **940 RIDGE RD #3**
4.4 CITY-ST-ZIP **LANTANA, FL 33462**

TITLE **D** ☐ DELETE
NAME **PETRI, SEPPANEN**
STREET ADDRESS **940 RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **PD PETRI SEPPANEN**
5.3 STREET ADDRESS **940 RIDGE RD #2**
5.4 CITY-ST-ZIP **LANTANA, FL 33462**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

NOT AT ALL REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 737-0058

CR2E037 (11/98)