

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719746

FILED
Mar 06, 2009
Secretary of State

Entity Name: FINNISH AMERICAN REST HOME, INC.

Current Principal Place of Business:

1800 SOUTH DRIVE
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1800 SOUTH DRIVE
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 23-7116222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PONZOLI, RONALD ESQ.
250 AUSTRALIAN AVENUE SOUTH
ONE CLEARLAKE CENTRE, SUITE 1504
WEST PALM BEACH, FL 33401 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: CD () Delete
Name: SKILLIN, SILVIA
Address: 1206 S LAKE DR #403
City-St-Zip: LANTANA, FL 33462

Title: TD () Delete
Name: PRABA, IRJA
Address: 2860 SOUTH OCEAN BLVD.
City-St-Zip: PALM BEACH, FL 33480

Title: SD () Delete
Name: BECKMAN, DOROTHY
Address: 224 VANDERBILT DRIVE
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: LAURILA, MAUNO
Address: 106 HALF MOON CIR. B2
City-St-Zip: HYPOLUXO, FL 33462

Title: D () Delete
Name: HILL, DAVID
Address: 42 SALISBURY B
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: MULLER, ANJA
Address: 1655 WOODBRIDGE LAKES CIR.
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: KONKOLA, JOHN
Address: 2204 SW 20TH TER
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PRABA, IRJA
Address: 2860 S. OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

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: SYLVIA SKILLIN

C

03/06/2009

Electronic Signature of Signing Officer or Director

Date