## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 731894 (2)

HOVIANNA VI APTS., INC.

**FILED** Apr 23 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address   |  |  |                         |   |  |
|---|--|--|-------------------------|---|--|
| S EMILY PELLE   | TIER   | % EMILY PELLETIER                          | % EMILY PELLETIER       |   | 3. Date Incorporated or Qualified  |
| 402 N. "D" STREET 402 N. "D" STREET   |  |  |                         |   | 02/18/1975   |
| LAKE WORTH FL 33460-2832 LAKE WORTH FL 33460-2832   |  |  |                         |   | 4. FEI Number Applied For  |
|   |  |  |                         |   | <b>59-1704500</b> Not Applicable   |
| 2. Principal Pi   | 2a. Mailing Address  |  |                         | 5. Certificate of Status Desired 38.75 Additional |  |
| 21  |  | 26   |                         |   | Fee Required   |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.                        |                         |   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |
| City & State  |  | City & State                               |                         |   | 7. Is this nonprofit corporation a homeowners association?   |
| 23  |  | Zip Country                                |                         | :   | X Yes No   |
| Zip   | Country  | Zip  | ¬ '                     | y   | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes \( \square \) No |
| 24  | 4 25 29 30 9. Name and Address of Current Registered Agent |  | <u> </u>                |   | Personal Property Tax due June 30. 🚨 Yes 📙 No  10. Name and Address of New Registered Agent                                |
| <del></del>   | 3. Halle and Address of Colle                              | in registered regent                       | 81                      | Name  | 10. Humo and Address of How Hogistolog Agent   |
| PELLETIER, EMILY  |  |  |                         |   |  |
| 402 N. "  |  | 82   | Street                  | Address (P.O. Box Number is Not Acceptable)       |  |
|   | ORTH FL 33460  |  | 83                      | <u> </u>  |  |
|   | O11117 1 2 00 100  |  | -                       |   | lool 7 of  |
|   |  |  | 84                      | City  | FL 85 Zip Code   |
| 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 registe  |  |  |                         |   |  |
| 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: Registe  |  |  |                         | ent signature                                     | required when reinstating) DATE  |
| 12.   |  |  | 13.                     |   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  |
| TITLE   | pd<br>Ketonen, Keijo                                       | ☐ DECEIE                                   | 1.1 TITLE               |   |  |
| NAME  | ALL IN MALE APPROPRIES AND A                               |  | 1.2 NAME                | * 1000000   |  |
| STREET ADDRESS  | LAVE MORTH E   |  |                         | T ADDRESS   |  |
| CITY-ST-ZIP<br>TITLE  | SD SD  | DELETE                                     | 1.4 CITY -<br>2.1 TITLE | 21-71   | ☐ Change ☐ Addition  |
| NAME  | PELLETIER, EMILY   |  | 2.2 NAME                |   |  |
| STREET ADDRESS  | 402 N. "D" ST., APT. #3                                    |  |                         | T ADDRESS   |  |
| CITY+ST-ZIP   | LAKE WORTH FL  |  | 2. 4 CITY-              |   | :  |
| TITLE   | TO   | DELETE                                     | 3.1 TITLE               | J. 2.,  | 70 Change ☐ Addition   |
| NAME  | PARLSOE, LINNEA  | • •  | 3.2 NAME                |   | SIVEN, MARJA-LEENA<br>402 N°D" STREET APT 2  |
| STREET ADORESS  | 402 N."D" STREET APT 2                                     |  | 3.3 STREE               | T ADDRESS   | 402 N"D" STREET APT 2  |
| CITY-ST-ZIP   | LAKE WORTH FL  |  | 3.4. CITY-              | ST-ZIP  | LAKE WURTH 7L  |
| TITLE   |  | ☐ ĐELETE                                   | 4.1 TITLE               |   | Change Addition  |
| NAME  | 4.2  |  | 4. 2 NAME               |   |  |
| STREET ADORESS  |  |  | 4.3 STREE               | T ADDRESS   |  |
| CITY - ST - ZIP   |  |  | 4.4 CITY                | ST-ZIP  |  |
| TITLE   |  | DELETE 5:                                  |                         |   | Change Addition  |
| NAME  |  |  | 5.2 NAME                |   |  |
| STREET ADDRESS  | ■ ·  |  |                         | T ADDRESS   |  |
| CITY - ST - ZIP   |  |  | 5.4 CITY-1<br>6.1 TITLE | ST-ZIP  | ☐ Change ☐ Addition  |
| TITLE   |  |  | 1                       |   | C Grisinge C Addition  |
| NAME<br>CYDEET ADODECC  |  |  | 6.2 NAME                |   |  |
|   |  |  | 1                       | T ADDRESS   |  |
| CITY-ST-ZIP   |  | the state filter where we have stiff after | 6.4 CITY                |   | ed in Section (10.07/2)/i) Floride Statutes I further certify that the information   |

r nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 for the property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes.