

FILE NOW: FILING FEE IS \$61.20

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 731894

1. Corporation Name

HOVIANNA VI APTS., INC.

Principal Place of Business

% EMILY PELLETIER
402 N. "D" STREET
LAKE WORTH FL 33460-2832

Mailing Address

% EMILY PELLETIER
402 N. "D" STREET
LAKE WORTH FL 33460-2832



2. Principal Place of Business

21 % BIRAN RAINHARTSEN

Suite, Apt. #, etc.

22 #1 402 N. "D" STREET

City & State

23 LAKE WORTH, FL

Zip

24 33460 25 USA

2a. Mailing Address

26 % BIRAN RAINHARTSEN

Suite, Apt. #, etc.

27 405 W. MANGO ST.

City & State

28 LANTANA, FL

Zip

29 33462 30 USA

3. Date Incorporated or Qualified

02/18/1975

4. FEI Number

59-1704500

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

PELLETIER, EMILY
402 N. "D" STREET APT #3
LAKE WORTH FL 33460

10. Name and Address of New Registered Agent

81 Name BIRAN RAINHARTSEN
82 Street Address (P.O. Box Number is Not Acceptable)
83 405 W. MANGO ST.
84 City LANTANA, FL 85 Zip Code 33460

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: BIRAN RAINHARTSEN 06/22/99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KETONEN, KELO
STREET ADDRESS 402 N. "D" STREET APT 1
CITY-ST-ZIP LAKE WORTH FL

TITLE SD
NAME PELLETIER, EMILY
STREET ADDRESS 402 N. "D" ST., APT. #3
CITY-ST-ZIP LAKE WORTH FL

TITLE TD
NAME SIVEN, MARJA-LEENA
STREET ADDRESS 402 NORTH D STREET, APT 2
CITY-ST-ZIP LAKE WORTH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME BIRAN RAINHARTSEN
1.3 STREET ADDRESS 402 N. "D" STREET, APT #1
1.4 CITY-ST-ZIP LAKE WORTH, FL 33460

2.1 TITLE SD
2.2 NAME MELISSA HOBBS
2.3 STREET ADDRESS 405 W. MANGO ST.
2.4 CITY-ST-ZIP LANTANA, FL 33462

3.1 TITLE TD
3.2 NAME TAPT, JOHNE LINDA
3.3 STREET ADDRESS 3570 S OCEAN BLVD #606
3.4 CITY-ST-ZIP S Palm Beach FL 33480

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 unchanged, or on an attachment with an address, with all other like empowered.

SIGNATURE: BIRAN RAINHARTSEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/06/99 561 547-8780

Date Keyline Phone

CR2E037 (11/98)