

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006 8:00 am
Secretary of State

02-28-2006 90012 025 ****70.00

DOCUMENT # 758553 1. Entity Name AMERICAN-FINNISH NORDIC CLUB, INC.					
Principal Place of Business KARHU, ANNELI O. 2102 WATERVIEW CIRCLE PALM SPRINGS, FL 33461 US			Mailing Address KARHU, ANNELI O. 2102 WATERVIEW CIRCLE PALM SPRINGS, FL 33461 US		
2. Principal Place of Business FINLAND HOUSE Suite, Apt. #, etc. 301 W. CENTRAL BLVD		3. Mailing Address 106 HALF MOON CIR. Suite, Apt. #, etc. B2.		50000326 	
City & State LANTANA, FL.		City & State HYPOLEXO, FL.		4. FEI Number 59-2196045	
Zip 33462		Country PALM BEACH		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ANNELI, KARHU O 2102 WATERVIEW CIRCLE PALM SPRINGS, FL 33461				7. Name and Address of New Registered Agent Name ANJA LAURILA Street Address (P.O. Box Number is Not Acceptable) 106 HALF MOON CIR B2 City HYPOLEXO, FL Zip Code 33462	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Anja Laurila, SD</i> ANJA LAURILA 2/22-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VENETJOK-KARTTUNEN, PIRKKO 157 ATLANTIS BLVD., #201 LAKE WORTH, FL 334621167	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VEKKAKANGAS, ERKKI 7317 W OAKRIDGE CIRCLE LANTANA, FL	<input checked="" type="checkbox"/> Delete	TITLE VD NAME VETTERANTA, HEIKKI STREET ADDRESS 7020 HALF MOON CIR. CITY-ST-ZIP HYPOLEXO, FL. 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KARHU, ANNELI O. 2102 WATERVIEW CIRCLE PALM SPRINGS, FL	<input checked="" type="checkbox"/> Delete	TITLE SD NAME LAURILA, ANJA STREET ADDRESS 106 HALF MOON CIR. CITY-ST-ZIP HYPOLEXO, FL. 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NORPPA, NILO 7020 HALF MOON CIR HYPOLEXO, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD TERVAROSKI, ARLENE 890 N. FEDERAL HYW LAKE WORTH, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENNA, GRANVICK 27 MAYFAIR LANE BOYNTON BEACH, FL 33426	<input type="checkbox"/> Delete	TITLE D NAME GRANVIK, HENNA STREET ADDRESS 27 MAYFAIR LANE CITY-ST-ZIP BOYNTON BEACH, FL. 33426	<input type="checkbox"/> Change <input type="checkbox"/> Addition CORRECTION	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>PIRKKO VENETJOKI-KARTTUNEN</i> Pirkko Venetjoki-Karttunen PD <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					