

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90130 012 ****70.00

DOCUMENT # 758553

1. Entity Name

AMERICAN-FINNISH NORDIC CLUB, INC.



Principal Place of Business

KARHU, ANNELI O.
2102 WATERVIEW CIRCLE
PALM SPGS. FL 33461
US

Mailing Address

KARHU, ANNELI O.
2102 WATERVIEW CIRCLE
PALM SPGS. FL 33461
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2196045**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional**

Fees Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAUH, ANNELI O
2102 WATERVIEW CIRCLE
PALM SPGS. FL 33461

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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: **PD** ☐ Delete
NAME: **VENETJOK-KARTTUNEN, PIRKKO**
STREET ADDRESS: **1024 S PALMWAY**
CITY-ST-ZIP: **LAKE WORTH FL 33460**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **VD** ☐ Delete
NAME: **VEHKAKANGAS, ERKKI**
STREET ADDRESS: **7317 W OAKRIDGE CIRCLE**
CITY-ST-ZIP: **LANTANA FL**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **SD** ☐ Delete
NAME: **KARHU, ANNELI O.**
STREET ADDRESS: **2102 WATERVIEW CIRCLE**
CITY-ST-ZIP: **PALM SPGS. FL**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **TD** ☐ Delete
NAME: **NORPPA, NILO**
STREET ADDRESS: **7319 W. OAKRIDGE CIRCLE**
CITY-ST-ZIP: **LANTANA FL**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **MD** ☐ Delete
NAME: **KLING, BERTHA**
STREET ADDRESS: **7234 OAKRIDGE CIRCLE**
CITY-ST-ZIP: **LANTANA FL**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **D** ☐ Delete
NAME: **KYLLIKKI, LEHTONEN**
STREET ADDRESS: **17 MAYFAIR LANE BOYNTON LAKES**
CITY-ST-ZIP: **LANTANA FL**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. 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 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 my address with all other like empowered persons.

SIGNATURE: **ANNELI O. KARHU**

SIGNATURE: [Signature] REQUIRED 9-3-03

(561) 968-1822

CR2E037 (4/03)