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NON-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90054 014 ****61.25

DOCUMENT # N00000002719

Entity Name
THE LANGUAGE SCHOOL, INC.



Principal Place of Business
**301 W CENTRAL BLVD.
LANTANA, FL 33462-4575**

Mailing Address
**301 W CENTRAL BLVD.
LANTANA, FL 33462-4575**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01272005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-1063170

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LURILA, MAUNO
106 HALF MOON CIR 82
HYPOLUXO, FL 33462**

7. Name and Address of New Registered Agent

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 re-registering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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

TITLE **VD** ☐ Delete
NAME **HILTUNEN, EILA**
STREET ADDRESS **1520 LAKE AVE**
CITY-ST-ZIP **LAKE WORTH, FL 33460**

TITLE **D** ☒ Delete
NAME **HIRVONEN, EILA**
STREET ADDRESS **1235 LANDS END RD**
CITY-ST-ZIP **POINT MANALAPAN, FL 33462**

TITLE **D** ☐ Delete
NAME **TORMANEN, TOIVO**
STREET ADDRESS **2440 LAKE OSBORNE DR., #204**
CITY-ST-ZIP **LAKE WORTH, FL 33461**

TITLE **TD** ☐ Delete
NAME **SEPPELIN, AARPE**
STREET ADDRESS **2562 GARDEN DR N, APT 305**
CITY-ST-ZIP **LAKE WORTH, FL 33461**

TITLE **PD** ☐ Delete
NAME **LAAJA, TAPANI**
STREET ADDRESS **720 S. PALMWAY**
CITY-ST-ZIP **LAKE WORTH, FL 33460**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **KETTUNEN, ANJA**
STREET ADDRESS **302 LAKE OSBORNE DR #28**
CITY-ST-ZIP **LAKE WORTH, FL 33461**

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

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

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

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 an address, with all other like empowered.

SIGNATURE:

Tapani Laaja **TAPANI LAAJA**

Date

03/27/05

Daytime Phone #

561 547-3447