

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003420

FILED
Apr 18, 2009
Secretary of State

Entity Name: THE NORDIC HERITAGE SOCIETY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

3160 LAKE OSBORNE DR.
110
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

3160 LAKE OSBORNE DR.
110
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-1155040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AALTONEN, AARNE A
3160 LAKE OSBORNE DR.
APT 110
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WESTERBACK, SONYA
Address: 3570 S. OCEAN BLVD. #712
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: SD () Delete
Name: MENDOZA, INGRID
Address: 2637 SW CRAN BROOK CT
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD () Delete
Name: HOLMSTROM, PHYLLIS
Address: 1011 S. D STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: AALTONEN, AARNE A
Address: 3160 LAKE OSBORNE DR.
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: OLSSON, ALLY
Address: 2920 NORWAY PINE LANE
City-St-Zip: LANTANA, FL 33463

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARNE A. AALTONEN

D

04/18/2009

Electronic Signature of Signing Officer or Director

Date