

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002374

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: HOVIANNA IV APTS. INC.

## Current Principal Place of Business:

410 SO "C" ST., APT. 4  
LAKE WORTH, FL 33460

## New Principal Place of Business:

410 SO C STREET  
LAKE WORTH, FL 33460

## Current Mailing Address:

410 SO "C" ST., APT. 4  
LAKE WORTH, FL 33460

## New Mailing Address:

410 SO C STREET  
APT 5  
LAKE WORTH, FL 33460

FEI Number: 59-1511134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KUMLIN, MARJATTA  
410 SO "C" ST., APT. 4  
LAKE WORTH, FL 33460 US

## Name and Address of New Registered Agent:

KUMLIN, MARJATTA  
410 SO C STREET  
APT 4  
LAKE WORTH, FL 33460 US

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: \_\_\_\_\_

04/07/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: BRUCE, CATANZARO  
Address: 410 SE ST APT 7  
City-St-Zip: LAKE WORTH, FL 33460

Title: DV ( ) Delete  
Name: KUMLIN, MARJATTA  
Address: 410 SO  
City-St-Zip: LAKE WORTH, FL 33460

Title: ST ( ) Delete  
Name: SUONPAA, MATTI  
Address: 410 SO  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BRUCE, CATANZARO  
Address: 410 SO C ST APT 7  
City-St-Zip: LAKE WORTH, FL 33460

Title: DV (X) Change ( ) Addition  
Name: KUMLIN, MARJATTA  
Address: 410 SO C STREET APT 4  
City-St-Zip: LAKE WORTH, FL 33460

Title: ST (X) Change ( ) Addition  
Name: SUONPAA, MATTI  
Address: 410 SO C STREET APT 5  
City-St-Zip: LAKE WORTH, FL 33460

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: MATTI SUONPAA

ST

04/07/2009

Electronic Signature of Signing Officer or Director

Date