2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31157

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

412 S. PALMWAY #6

PALOKAS, IMELI

LANTANA, FL 33462

LAKE WORTH, FL 33460

1102 S, OAKRIDGE CIRCLE

() Delete

FILED Jan 29, 2009 Secretary of State

Entity Name: FRIENDS OF THE FINNISH AMERICAN REST HOME, INC.

Current Principal Place of Business: New Principal Place of Business: 1800 SOUTH DRIVE LAKE WORTH, FL 33461 US **Current Mailing Address: New Mailing Address:** 1800 SOUTH DRIVE LAKE WORTH, FL 33461 US FEI Number: 23-7281906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KIVISTO, JUSSI K. 1010 TENTH AVENUE NORTH LAKE WORTH, FL 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete VENETJOKI-KARTRUNEN, PIAKKO VENETJOKI-KARTRUNEN, PIRKKO Name: Name: 157 ATLANTIS BLVD. APT. 201 Address: 157 ATLANTIS BLVD. APT. 201 Address: City-St-Zip: ATLANTIS, FL 33462 City-St-Zip: ATLANTIS, FL 33462 Title: DVP () Delete Title: (X) Change () Addition SILVAN, MIRIA Name: SILVAN, MIRJA Name: Address: 7829 COLONY LAKE DR Address: 7829 COLONY LAKE DR City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: () Change () Addition MULLER, ANJA Name: Name: 1655 WOODBRIDGE/LAKES CIR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: DS Title: () Change () Addition () Delete RANTALA, HELI

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: PIRKKO VENETJOKI KARTTUNEN DP 01/29/2009

(X) Change () Addition

PALOKAS, IRMELI

LANTANA, FL 33462

1102 S, OAKRIDGE CIRCLE