

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2002 8:00 am
Secretary of State

07-15-2002 90196 021 ****61.25

DOCUMENT # N35131

1. Entity Name

FINNISH WAR VETERANS SUPPORT FOUNDATION, INC.

Principal Place of Business

Mailing Address

8 LEHTO LANE
 LAKE WORTH FL 33461
 US

1415 LAKEVIEW DRIVE
 LAKE WORTH FL 33461-6047

2. Principal Place of Business

1415 LAKEVIEW DR

3. Mailing Address

LAKEVIEW DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE

City & State

LAKE WORTH FL

Zip

Country

Zip

33461

Country

PALM BEACH

4. FEI Number

65-0175942

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AALTONEN, AARNE
1415 LAKEVIEW DRIVE
LAKE WORTH FL 33461-6047

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.

SIGNATURE

AARNE A. AALTONEN PD

07/08-02

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

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **TD**
 STREET ADDRESS **AALTONEN, ROSE-MARIE**
 CITY-ST-ZIP **415 LAKEVIEW DRIVE**
LAKE WORTH FL 33461-6047

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **UKKONEN, JAAKKO**
 CITY-ST-ZIP **2668 N GARDEN DRIVE NO 212**
LAKE WORTH FL 33461-2257

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **VASUMAKI, SYLVIA**
 CITY-ST-ZIP **200 S WATERWAY DRIVE NO 312**
LANTANA FL 33462-1821

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

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **AALTONEN, AARNE**
 CITY-ST-ZIP **1415 LAKEVIEW DRIVE**
LAKE WORTH FL 33461

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

AARNE A. AALTONEN **07/08/02** **(561) 582-9981**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)