

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000088153

1. Entity Name

ACORDIA CENTER, INC.



Principal Place of Business

1701 LAKE WORTH RD
9
LAKE WORTH FL 33460

Mailing Address

1320 NEW WORLD AVE
LANTANA FL 33462-1410



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number

65-1038098

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

VAISANEN, JUHA K
1320 NEW WORLD AVE.
LANTANA FL 33462

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 registering)

DATE

FILE NOW!!! - FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☐ Delete
NAME BRINER, PIRKKO A
STREET ADDRESS 1320 NEW WORLD AVE.
CITY-ST-ZIP LANTANA FL 33462-1410

TITLE ☐ Change ☐ Addition
NAME U00000947237
STREET ADDRESS 06/02/08-80005-020 150.00
CITY-ST-ZIP

TITLE P ☐ Delete
NAME VAISANEN, JUHA K
STREET ADDRESS 1320 NEW WORLD AVE
CITY-ST-ZIP LANTANA FL 33462-1410

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 exemptions contained in Section 119, 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 607, 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:

Juha K. Vaisanen PRES/OWNER
JUHA K. VAISANEN

04-30-2008 (561) 585-3320

Date

Printed Name