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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

747521

(3)

THE BUTTONWOOD HOME OWNERS' ASSOCIATION, INC.

LAKE WORTH FL 33463 LAKE WORTH FL 33463-2442 3. Date Incorporated or Qualified 06/05/1979 3. Date Incorporated or Qualified 06/05/1979 3. Date Incorporated or Qualified 06/05/1979 4. FEI Number Applied For Not Applied	Principal Place	of Business	Mailing Address							
2. Principel Place of Business	3370 SHADOW WOOD DRIVE LAKE WORTH FL 33463									
Solide, Apt. #, etc. 26				-			3. Date incorporated or Qua 06/05/1979	lified 3a.		
Solic Apt #, etc. Soli	2. Principal Place of Business		₁					· · · · · · · · · · · · · · · · · · ·		
29 Country Zip Country Zip Country Addition Country Country Country Addition Country C	Suite, Apt. #, etc.						5. Certificate of Status Desire	ed 🔲	\$8.75	Additional
Country Zip Country Zip Country Zip Country S. This corporation has liability for Intangible lax under s. 199 032, 283 39 To Name and Address of New Registered Agent To. Name and Agent To. Name and Agent To. Name and Name and Agent To. Name and Agent To. Name and Agent To. N			<u></u>							
GELFAND, MICHAEL J 250 AUSTRALIAN AVE. S. ONE CLEARLAKE CENTRE, STE. 1010 WEST PALM BCH FL 33401 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation abornite this statement for the purpose of changing list registered agent and minimizer with, and accept the obligations of. Section 517,0503. Florida Statutes, the above-named corporation abornite this statement for the purpose of changing list registered circles or registered agent. or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent lam minimizer with, and accept the obligations of. Section 517,0503. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. IT		Country	Žip	Cour	itry	***************************************	8. This corporation has liabil	ty for intangit		***************************************
GELFAND, MICHAEL J 250 AUSTRALIAN AVE., S. ONE CLEARLAKE CENTRE, STE. 1010 WEST PALM BCH FL 33401 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of, Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered agent 1 am familiar with, and accept the obligators of Section 617.0503, Florida Statutes, the above-ment occupations authoritis this statement for the purpose of changing list registered differences. In the control of the cont	24			30						
GELFAND, MICHAEL J 250 AUSTRALIAN AVE, S. ONE CLEARLAKE CENTRE, STE: 1010 WEST PALM BCH FL: 33401 11. Pursuant to the provisions of Sections 617:0502 and 617:1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent I am firmlier with, and accept the obligations of, Section 617:0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 16. OFFICERS AND DIRECTORS 17. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONSICHANGES TO OFFICERS AND		9. Name and Address of Current	Registered Agent			 	10. Name and Address of N	ew Registere	d Agent	
250 AUSTRALIAN AVE., S. ONE CLEARLAKE CENTRE, STE. 1010 WEST PALM BCH FL 33401 11. Pursuant to the provisions of Sactons 617 0502 and 617 1508. Florids Statutes, the above named corporation automits this statement for the purpose of changing its registered agent of marginals with, and accept the obligations of, Section 617 0503. Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. DP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. DP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OF				[B1 1	Name				
ONE CLEARLAKE CENTRE, STE. 1010 WEST PALM BCH FL 33401 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent or boths, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. MARE DVAS JOHN MCCABE 12 MARE JOHN MCCABE 12 MARE JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 14 TITLE DS ALEXANDER KLEIN 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 13 STREFADORESS 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 14 TITLE DS ALEXANDER KLEIN 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 14 TITLE DS ALEXANDER KLEIN 3370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE 15 STREFADORESS 370 SHADOW WOOD DRIVE GREENACRES FL JOHN MCCABE JOHN MCCABE 15 STREFADORESS 370 SHADO			62 Street Ac			Street Addr	ess (P.O. Box Number is Not Acc	ceptable)		
WEST PALM BCH FL 33401 B4 City FL S5 Zip Code					B3	· · · · · · · · · · · · · · · · · · ·		·····		
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Signature for procedurate of apported agent and life if applicated Agent signature required when interlating) DATE	11. Pursuant t office or re agent I ar	to the provisions of Sections 617.0502 egistered agent, or both, in the State on familiar with, and accept the obligat	and 617.1508, Florida Statuter f Florida. Such change was au ions of, Section 617.0503, Flor	s, the ab uthorized ida Statu	ove-n by th ites.	amed corp ne corporati	oration submits this statement fo ion's board of directors. I hereby	r the purpose accept the ap	of changing opointment a	its registered s registered
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John Mr (alle () 1/1/10)
SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

2/4/97

561) 968-7555

FILED

Feb 13 1997 8:00am

Secretary of State