

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

CR2E031(7/97)

1	
(Corporation Name)	(Document#)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait  NEW FILINGS  Profit Not for Profit Limited Liability Domestication	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent  Certified Copy  Certified Copy  Certified Copy  Copy  Certified Copy  Copy
Other OTHER FILINGS	Dissolution/Withdrawal  Merger  REGISTRATION/QUALIFICATION  Foreign
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
P. 200	Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 2, 2001

ST. JOHN, CORE, FIORE & LEMME, P.A. SUITE 600 500 AUSTRALIAN AVENUE SOUTH WEST PALM BEACH, FL 33401

SUBJECT: THE BUTTONWOOD HOME OWNERS' ASSOCIATION, INC. Ref. Number: 747521

We have received your document for THE BUTTONWOOD HOME OWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Corporate Specialist

Letter Number: 701A00055325

The name of the signator is printed below the signature as requested. as

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 6	
	l corporation organized under the laws of the St owing statement in order to change its register	
the State of Flor	rida	
1. The name of	the corporation is: The Buttonwood Home C	Owners' Association, Inc.
• • • • • • • • • • • • • • • • • • • •		
2. The mailing:	address of the corporation is: 3370 Shadow V	Wood Drive, Greenacres, Florida
	33463	
3. Date of inco	rporation/qualification: 6/5/1979	Document number: 747521
4. The name an	d address of the current registered agent and off	îice:
	Michael J. Gelfand	A
	250 S. Australian Avenue, Suite	
	West Palm Beach, Florida 33401	HAA T
5. The name an	nd address of the new registered agent and office	e: (P. O. Box Not Acceptable)
	St. John, Core, Fiore & Lemme, P.	<u>a.                                     </u>
	500 Australian Avenue South, Suit	e 600 SE
	West Palm Beach, Florida 33401	
The street addragent, as change	ress of its registered office and the street addre	ss of the business office of its registered
Such change	as authorized by resolution duly adopted by it	s board of directors or by an officer so
aumorizea	THE CONSTITUTE OF THE PARTY OF	
(Signature	e of an officer, chairman or vice chairman of the board)	9-17-01 (Date)
PHAR	UES R. MILLER	
	(Printed or typed name and title)	Company the share stated
Having been n corporation, I I further agree performance o registered age	named as registered agent and to accept servic hereby accept the appointment as registered a to comply with the provisions of all statutes r of my duties, and I am familiar with and accept	e of process for the above stated agent and agree to act in the proper and complete the obligation of my position as
regisierediage	" / S(lela	00/21/01
DA	(Signature of Registered Agent)	09/21/01 (Date)
If signing on beh	•	
St. Joh	n, Core, Fiore & Lemme, P.A. (Typed or Printed Name)	President (Capacity)
	* * * FILING FEE: \$35.0	00 * * *
CD02045/2/07)		

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314