2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747521

Entity Name: THE BUTTONWOOD HOME OWNERS' ASSOCIATION, INC.

FILED
Apr 04, 2017
Secretary of State
CC3076683425

Current Principal Place of Business:

3370 SHADOW WOOD DRIVE GREENACRES. FL 33463

Current Mailing Address:

3370 SHADOW WOOD DRIVE GREENACRES, FL 33463

FEI Number: 59-1941313 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPNICK, MICHAEL E ESQ. 1655 PALM BEACH LAKES BLVD. SUITE C-500 WEST PALM BEACH, FL 33401 US

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

Officer/Director Detail:

Title PRESIDENT Title VP

Name FONTI, FRANCESCO Name RUSIN, MARY JANE

Address 6129 LAKEMONT CIRCLE Address 3370 SHADOW WOOD DRIVE City-State-Zip: GREENACRES FL 33463 City-State-Zip: GREENACRES FL 33463

Title SECRETARY Title TREASURER

Name RUSIN, MARY JANE Name VANFOSSEN, THOMAS

Address 3370 SHADOW WOOD DRIVE Address 3370 SHADOW WOOD DRIVE
City-State-Zip: GREENACRES FL 33463 City-State-Zip: GREENACRES FL 33463

Title DIRECTOR Title DIRECTOR

Name GERRISH, RICHARD Name DIONNA, ANTHONY

Address 3370 SHADOW WOOD DRIVE Address 3370 SHADOW WOOD DRIVE

City-State-Zip: GREENACRES FL 33463 City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name NONE

Address 3370 SHADOW WOOD DRIVE City-State-Zip: GREENACRES FL 33463

I hereby 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 all other like empowered.

SIGNATURE: SUSAN CAMARDELLA

Electronic Signature of Signing Officer/Director Detail

C.A.M.

04/04/2017