

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18752

Entity Name: THE MANORS AT BUTLER BAY ASSOCIATION, INC.**Current Principal Place of Business:**2527 CARTER GROVE CIRCLE
WINDERMERE, FL 34786**Current Mailing Address:**P.O. BOX 1167
WINDERMERE, FL 34786 US**FEI Number:** 59-2846642**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOLICA, MIKE
330 HARBOUR ISLE WAY
SUITE 1020
LONGWOOD, FL 32750 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	TREASURER
Name	HENSLER, KATE
Address	2527 CARTER GROVE CIRCLE
City-State-Zip:	WINDERMERE FL 34786

Title	VP
Name	JORGENSEN, DAVID
Address	2527 CARTER GROVE CIRCLE
City-State-Zip:	WINDERMERE FL 34786

Title	PRESIDENT
Name	DICHIRIA, DOM
Address	2521 CARTER GROVE CIRCLE
City-State-Zip:	WINDERMERE FL 34786

Title	SECRETARY
Name	BORDELON, KATHERINE
Address	2550 CARTER GROVE CIRCLE
City-State-Zip:	WINDERMERE FL 34786

Title	DIRECTOR
Name	ABRUSCI, MICHAEL
Address	2515 CARTER GROVE CIRCLE
City-State-Zip:	WINDERMERE FL 34786

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: KATE HENSLER

TREASURER

05/07/2013

Electronic Signature of Signing Officer/Director Detail_____
Date