

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726112

FILED
Mar 02, 2009
Secretary of State

Entity Name: BUTTONWOOD BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

96000 OVERSEAS HWY
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

96000 OVERSEAS HWY
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 59-1521503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID
BECKER & POLIKOFF
121 ALHAMBRA PLAZA SUITE 1000
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GROVE, BONNIE
Address: 96000 OVERSEAS HWY W-43
City-St-Zip: KEY LARGO, FL 33037

Title: VP () Delete
Name: HOLD, ROBERT P
Address: 1600 SUMMERLAND AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: BESGEN, WILLIAM H
Address: 59 PEPPER LANE
City-St-Zip: NEW CANAAN, CT 06840

Title: TD () Delete
Name: PEREZ, LUIS E
Address: 9380 SW 92 STREET
City-St-Zip: MIAMI, FL 38176

Title: TD () Delete
Name: BALDATTI, MARIO
Address: 96000 OVERSEAS HIGHWAY W-5
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: BURRIS, RONALD
Address: 1402 ALLEY CORNER ROAD
City-St-Zip: CLAYTON, DE 19938

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BALDATTI, MARIO O
Address: 96000 OVERSEAS HWY W-5
City-St-Zip: KEY LARGO,, FL 33037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: GUERRA, FRANCISCO A JR
Address: 6480 SW 49TH ST
City-St-Zip: MIAMI, FL 38155

Title: D (X) Change () Addition
Name: OWENS, DENNIS
Address: 6638 NEWPORT LAKE CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BONNIE GROVE

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date