

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738952

FILED
Apr 27, 2006
Secretary of State

Entity Name: BUTLERHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

107 26TH AVE
ST PETERSBURG, FL 33706

New Principal Place of Business:

Current Mailing Address:

107 26TH AVE
ST PETERSBURG, FL 33706

New Mailing Address:

FEI Number: 59-1727447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGLASS, ROBERT
107 26TH AVE
ST. PETERSBURG BEACH, FL 33706 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: SD () Delete
Name: WRIGHT, CARLA
Address: 107 26TH AVE #2
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: TD () Delete
Name: WALKER, JOAN
Address: 107 26TH AVE #1
City-St-Zip: ST PETE BCH, FL 33706

Title: PD () Delete
Name: KRAFCIK, TIMOTHY
Address: 107 26TH AVE #4
City-St-Zip: ST PETE BCH, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: HOLTZ, CHARLI
Address: 107 26TH AVE #6
City-St-Zip: ST. PETE BEACH, FL 33706

Title: TD (X) Change () Addition
Name: PRAETE, BARBARA
Address: 107 26TH AVE #5
City-St-Zip: ST PETE BEACH, FL 33706

Title: PD (X) Change () Addition
Name: KRAFCIK, TIMOTHY
Address: 107 26TH AVE #4
City-St-Zip: ST PETE BEACH, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the 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: TIM KRAFCIK

PD

04/27/2006

Electronic Signature of Signing Officer or Director

Date