

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754743

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** BUTTONWOOD COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1877 NORTHGATE BLVD  
STE 4  
SARASOTA, FL 34234 US

**New Principal Place of Business:**

**Current Mailing Address:**

1877 NORTHGATE BLVD  
STE 4  
SARASOTA, FL 34234 US

**New Mailing Address:**

**FEI Number:** 59-2169171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCLLENATHEN, CHAD M  
1820 RINGLING BOULEVARD  
SARASOTA, FL 34236 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  
**Name:** FLOWERS, JACK P  
**Address:** 3630 GULF OF MEXICO DR B-104  
**City-St-Zip:** LONGBOAT KEY, FL 34228 US

**Title:** S  
**Name:** JABBUR, ELLEN S  
**Address:** 3540 GULF OF MEXICO DRIVE C-203  
**City-St-Zip:** LONGBOAT KEY, FL 34228 US

**Title:** D  
**Name:** DEMBO, DONALD D  
**Address:** 3630 GULF OF MEXICO DRIVE B-105  
**City-St-Zip:** LONGBOAT KEY, FL 34228 US

**Title:** T  
**Name:** CLARK, JOHN T  
**Address:** 3660 GULF OF MEXICO DR A-202  
**City-St-Zip:** LONGBOAT KEY, FL 34228 US

**Title:** AS  
**Name:** MANNING, MICHAEL AS  
**Address:** 1877 NORTHGATE BLVD, STE 4  
**City-St-Zip:** SARASOTA, FL 34234 US

**Title:** VP  
**Name:** MACALLISTER, MARTHA VP  
**Address:** 3540 GULF OF MEXICO DR C-303  
**City-St-Zip:** LONGBOAT KEY, FL 34228

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:** MICHAEL MANNING

AS

02/17/2010

Electronic Signature of Signing Officer or Director

Date