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Feb 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754968 (6)

1. Corporation Name

THE BUTTONWOOD WEST ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3201 SILVER BUTTONWOOD DRIVE GREENACRES CITY FL 33463	3201 SILVER BUTTONWOOD DRIVE GREENACRES CITY FL 33463-8326

3. Date Incorporated or Qualified: 11/03/1980
3a. Date of Last Report: 02/15/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 59-2066948 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ZELMAN, ALFRED
6304 SILK DOGWOOD LANE
GREENACRES CITY FL 33463

10. Name and Address of New Registered Agent

81 Name: BARBARA H. JENSEN
82 Street Address (P.O. Box Number is Not Acceptable): 6281 Tall Cypress Circle
83
84 City: Greenacres FL 85 Zip Code: 33463

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: BARBARA H. JENSEN, PRESIDENT — Barbara H. Jensen, President — 2/4/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	ZELMAN, ALFRED		1.2 NAME	BARBARA H. JENSEN	
STREET ADDRESS	6304 SILK DOGWOOD LANE		1.3 STREET ADDRESS	6281 Tall Cypress Circle	
CITY-ST-ZIP	GREENACRES FL		1.4 CITY-ST-ZIP	Greenacres, FL 33463	
TITLE	VP	☐ DELETE	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	HOWARD, JACK		2.2 NAME	HERMAN GAINEN	
STREET ADDRESS	6340 TALL CYPRESS CIRCLE		2.3 STREET ADDRESS	6332 Tall Cypress Circle	
CITY-ST-ZIP	GREENACRES FL		2.4 CITY-ST-ZIP	Greenacres, FL 33463	
TITLE	S	☐ DELETE	3.1 TITLE	S	☒ Change ☐ Addition
NAME	KAPLAN, IRVING		3.2 NAME	HELEN TRAVIS	
STREET ADDRESS	3317 SILVER BUTTONWOOD DRIVE		3.3 STREET ADDRESS	6255 Blue Baneberry Lane	
CITY-ST-ZIP	GREENACRES FL		3.4 CITY-ST-ZIP	Greenacres, FL 33463	
TITLE	T	☐ DELETE	4.1 TITLE	T	☒ Change ☐ Addition
NAME	BORNSTEIN, SIMONE		4.2 NAME	VIRGIL HOWARD	
STREET ADDRESS	6239 RED CEDAR CIR		4.3 STREET ADDRESS	6340 Tall Cypress Circe	
CITY-ST-ZIP	GREENACRES FL		4.4 CITY-ST-ZIP	Greenacres, FL 33463	
TITLE	D	☐ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	GROELINGER, HERBERT		5.2 NAME	FRED IANNACONE	
STREET ADDRESS	6260 RED CEDAR CIR		5.3 STREET ADDRESS	6211 Red Cedar Circle	
CITY-ST-ZIP	GREENACRES FL		5.4 CITY-ST-ZIP	Greeenacres, FL 33463	
TITLE	D	☐ DELETE	6.1 TITLE	D	☐ Change ☐ Addition
NAME	VITALIANI, EDWARD		6.2 NAME	EDWARD VITALIANI	
STREET ADDRESS	6265 AMERICAN AZALEA LANE		6.3 STREET ADDRESS	6265 AMERICAN AZALEA LANE	
CITY-ST-ZIP	GREENACRES FL		6.4 CITY-ST-ZIP	GREENACRES, FL 33463	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Virgil Howard — VIRGIL HOWARD — (561) 964-4049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0043851