

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2001 8:00 am**  
**Secretary of State**

05-05-2001 90822 022 \*\*\*\*61.25

**DOCUMENT # 757742**

1. Entity Name

**BUTLER BAY ASSOCIATION, INC.**

Principal Place of Business

2180 WEST SR 434  
 STE. 5000  
 LONGWOOD FL 32779-5044  
 US

Mailing Address

2180 WEST SR 434  
 STE. 5000  
 LONGWOOD FL 32779-5044  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2417570**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HART, JAMES W JR.**  
**SENTRY MANAGEMENT INC.**  
**2180 WEST SR 434, STE. 5000**  
**LONGWOOD FL 32779**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
 NAME POLAROLO, EUGENE  
 STREET ADDRESS 2127 LAKE CRESCENT CT  
 CITY-ST-ZIP WINDERMERE FL

TITLE PD ☐ Change ☒ Addition  
 NAME OAKLEY, SEAN  
 STREET ADDRESS 2909 SUNBITTERN CT  
 CITY-ST-ZIP WINDERMERE, FL 34786-7839

TITLE SD ☒ Delete  
 NAME TAYLOR, KAREN  
 STREET ADDRESS 12546 BUTLER BAY CT  
 CITY-ST-ZIP WINDERMERE FL

TITLE VD ☐ Change ☒ Addition  
 NAME POIDOMANI, MARK  
 STREET ADDRESS 12125 CRESCENT COVE CT  
 CITY-ST-ZIP WINDERMERE, FL 32786-7700

TITLE TD ☒ Delete  
 NAME BERGER, ERIK  
 STREET ADDRESS 12717 BUTLER BAY CT  
 CITY-ST-ZIP WINDERMERE FL

TITLE VD ☐ Change ☒ Addition  
 NAME HART JR, WILLIAM D  
 STREET ADDRESS 3302 JUST A MERE CT  
 CITY-ST-ZIP WINDERMERE, FL 34786-6116

TITLE D ☒ Delete  
 NAME AGUEL, GEORGE  
 STREET ADDRESS 12548 BULTER BAY CT  
 CITY-ST-ZIP WINDERMERE FL

TITLE VD ☐ Change ☒ Addition  
 NAME JARVIS, EDGAR L  
 STREET ADDRESS 1735 LAKE ROBERTS CT  
 CITY-ST-ZIP WINDERMERE, FL 34786-7824

TITLE D ☒ Delete  
 NAME PELUSO, ANTHONY  
 STREET ADDRESS 12603 BULTER BAY CT.  
 CITY-ST-ZIP WINDERMERE FL

TITLE STD ☐ Change ☒ Addition  
 NAME THOMPSON, BRADLEY F.  
 STREET ADDRESS 2828 MARQUESAS CT  
 CITY-ST-ZIP WINDERMERE, FL 34786-7824

TITLE D ☒ Delete  
 NAME MATINRAZIM, ANTHONY  
 STREET ADDRESS 12754 BUTLER BAY COURT  
 CITY-ST-ZIP WINDERMERE FL 34786

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)