## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 757742** 

Entity Name: BUTLER BAY ASSOCIATION, INC.

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434 STE. 5000

LONGWOOD, FL 327795044 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 STE. 5000

LONGWOOD, FL 327795044 US

FEI Number: 59-2417570 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

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:

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD ( ) Delete

 Name:
 BERRYMAN, RON

 Address:
 12137 CRESCENT COVE CT

City-St-Zip: WINDERMERE, FL 34786

Title: VPD ( ) Delete Name: HARKER, KEN

Address: 12001 LAKE BUTLER BV
City-St-Zip: WINDERMERE, FL 34786

Title: STD () Delete
Name: JARVIS, EDGAR
Address: 1735 LAKE ROBERTS CT

WINDERMERE, FL 34786

Title: D () Delete

 Name:
 KELSEY, PHIL

 Address:
 2804 MARQUESAS CT

 City-St-Zip:
 WINDERMERE, FL 34786

Title: PD (X) Change ( ) Addition

Name: POUNDS, GREG Address: 2309 BUTLER BAY DR N

Address: 2309 BUTLER BAY DR N
City-St-Zip: WINDERMERE, FL 34786

Title: VPD (X) Change ( ) Addition

Name: BAER, DAVID

Address: 3442 BAY MEADOW CT City-St-Zip: WINDERMERE, FL 34786

Title: STD (X) Change ( ) Addition

Name: GLOCK, LARRY
Address: 3105 BUTLER BAY DR N
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change ( ) Addition

Name: FANELLI, DAN
Address: 2958 MARQUESAS CT
City-St-Zip: WINDERMERE, FL 34786

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: GREG POUNDS PD 04/09/2007