2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757742

FILED Apr 23, 2009 Secretary of State

Entity Name: BUTLER BAY ASSOCIATION, INC.

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

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 REC
 (X) Change () Addition

 Name:
 POUNDS, GREGORY
 Name:
 CRAWFORD, TERRENCE P

 Address:
 2309 BUTLER BAY DR N
 Address:
 2180 WEST SR 434 SUITE 5000

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 LONGWOOD, FL 32779

Title: D (X) Delete Title: () Change () Addition

 Name:
 THOMPSON, BRADLEY
 Name:

 Address:
 2828 MARQUESAS CT
 Address:

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 SCHNEIDER, KEN
 Name:

 Address:
 12626 BUTLER BAY CT
 Address:

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{(X) Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 BATTEN, JOE
 Name:

 Address:
 3418 BAY MEADOW CT
 Address:

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TERRENCE P CRAWFORD REC 04/23/2009