

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J50583** (0)

1. Corporation Name  
**BUTLER PROPERTIES, INC.**



Principal Place of Business: **805 E. HILLSBORO BLVD DEERFIELD BEACH FL 33441**  
Mailing Address: **805 E. HILLSBORO BLVD DEERFIELD BEACH FL 33441**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>12/23/1986</b>	3a. Date of Last Report <b>02/07/1995</b>
21 State, Apt. #, etc.	26 State, Apt. #, etc.	4. FEI Number <b>59-2748057</b>	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24 Country	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>BUTLER, JACK E. 2363 LOBLOLLY LANE DEERFIELD BEACH FL 33441</b>	10. Name and Address of New Registered Agent
	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Jack E. Butler* 1/25/96  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTLER, JACK E.	1.2 NAME	
STREET ADDRESS	2363 LOBLOLLY LN.	1.3 STREET ADDRESS	
CITY - ST - ZIP	DEERFIELD BEACH FL	1.4 CITY - ST - ZIP	
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTLER, ROBERT D.	2.2 NAME	
STREET ADDRESS	84 S.E. 4TH AVE.	2.3 STREET ADDRESS	
CITY - ST - ZIP	DEERFIELD BEACH FL	2.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTLER, MOLLY W.	3.2 NAME	
STREET ADDRESS	2363 LOBLOLLY LN.	3.3 STREET ADDRESS	
CITY - ST - ZIP	DEERFIELD BEACH FL	3.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTLER, MARTHA P.	4.2 NAME	
STREET ADDRESS	84 S.E. 4TH AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	DEERFIELD BEACH FL	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURCIO, PETER ALAN	5.2 NAME	
STREET ADDRESS	77 E CAMINO REAL	5.3 STREET ADDRESS	<i>D Karen Beach 77 E. Camino Real Boca Raton, FL</i>
CITY - ST - ZIP	BOCA RATON FL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jack E. Butler* Jack E. Butler 1/25/96 305 421 2022  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (12/95)