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

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Mar 03 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

(1)

BUTLER FARMS HOMEOWNERS ASSOCIATION, INC.  Principal Place of Business Mailing Address						
P.O. BOX 8724 CORAL SPRINGS FL 33075 P.O. BOX 8724 CORAL SPRINGS FL 33075			075		3. Date Incorporated or Qualified 04/13/1984	***************************************
					4. FEI Number	Applied For
2. Principal P	Place of Business	2a. Mailing Address		<del></del>	59-2492119	Not Applicable
21	iddo of bookiedd	26			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be
22 Chu I State		27			Trust Fund Contribution	Added to Fees
City & State		City & State	· · ·		7. Is this nonprofit corporation a homeowr	
Zip	Country	Zip	Count	itry	Yes      This corporation owes or has paid the corporation.	No
24	25	29	30	.,	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent
			8	Name A	NICHAEL R. EMERY	
4 <del>875 N PEDERAL HW</del> Y			8	Street Ad	dress (P.O. Box Number Is Not Acceptable)	
7 <del>TH FLOOR-</del>			<b> </b>		DNE FINANCIAL PLAZA	
FT <del>- LAUDERDALE FL-33308 -</del>			Ĺ	··· • · · · · · · · · · · · · · · · · ·	Suite 2020	
			T	City F	FORT LAUDERDALE F	L 85 Zip Code 333 74
11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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.						
agent. I am familiar with, and accept the obligations of Segion 617.0503, Florida Statutes.						
SIGNATURE	Williah X K	_ ( <i>X</i> .			2-	-24-48
12,	Signature, typed or printed name of registered age OFFICERS ANI	ont and tille if applicable (N ND DIRECTORS	NOTE: Registered A	Agent signature rec	outred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AI	
TITLE	P	DELETE	1.1 TITLE	E T	ADDITIONO OF THE PARTY P	Change Addition
NAME	LECLAIR, STEPHEN A.		1.2 NAM			
STREET ADDRESS	2450 NE MIAMI GARDENS DR	R		EET ADDRESS		
CITY-ST-ZIP	MIAMI FL			r-ST-ZIP		
TITLE	* VICE PRESIDENT DELETE		2.1 TITLE	E	VICE PRESIDENT	∴ Change
NAME	RENDA, JERRY		2.2 KAM	4E	RENDA, JERRY 5100 NW 64DRIVE CORAL SPRINGS, FL	
STREET ADDRESS	5100 NW G4 DR		2.3 STRE	EET ADDRESS	5100 NW 64 DRIVE	
CITY-ST-ZYP	CORAL SPRINGS FL	The state of the s		Y-ST-ZIP	CORAL SPRINGS, FL	
TITLE	S COLDERADTZ LVIE	DELETE	3.1 TITLE			Change Addition
NAME OTREET ADDRESS	SCHWARTZ, LYLE		3.2 NAM			
STREET ADORESS	5657 N.W. 64TH LANE CORAL SPRINGS FL			EET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	3.4. CHY 4.1 TITLE	Y-ST-ZIP		Change Addition
NAME	CABLE, ROBYN		4.1 IIILE			L Digities L Production
STREET ADDRESS	6388 NW 54TH DR			EET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL			-ST-ZIP		
TITLE	₩-D	DELETE	5.1 TITLE			Change Addition
NAME	JUNNÆR, BARRY		5.2 NAMI	1E		
STREET ADDRESS	6055 N.W. 48TH CT.		5.3 STRE	EET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		5.4 CITY	'-ST-ZIP		
TITLE	, T	☐ DELETE	6.1 TITLE	Ε	<del></del>	Change Addition
NAME	WHITBOURNE, DAVID P.		6.2 NAM			
STREET ADDRESS	5326 NW 66TH AVENUE			EET ADDRESS		
CITY_ST_7IP	CORAL SPRINGS FL		R A CITY	CT 7ID		

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 upplication in an upplication is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an upplication of true of empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in conditional months with all address.