2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 26, 2009 DOCUMENT# N18752 Secretary of State

Entity Name: THE MANORS AT BUTLER BAY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2574 CARTER GROVE CIRCLE 2527 CARTER GROVE CIRCLE WINDERMERE, FL 34786 WINDERMERE, FL 34786 **Current Mailing Address: New Mailing Address:** P.O. BOX 1167 WINDERMERE, FL 34786 US FEI Number: 59-2846642 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: MUNROE, KEVIN 2813 S HÁWASSEE ROAD SUITE 201 ORLANDO, FL 32835 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HENSLER, KATE Name: Name: Address: 2527 CARTER GROVE CIRCLE Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip:

Title: () Delete Name: HORAN, ANDY

Address: 2641 TRYON PLACE City-St-Zip: WINDERMERE, FL 34786

Title: () Delete PEARSON, DAX Name:

2574 CARTER GROVE CIRCLE Address: City-St-Zip: WINDERMERE, FL 34786

Title: (X) Delete Name: GRANDE, BRAD

2600 CARTER GROVE CIRCLE Address: City-St-Zip: WINDERMERE, FL 34786

() Change () Addition

Name: Address: City-St-Zip:

Name:

Title:

Title: (X) Change () Addition Name:

GRANDE, BRAD

2600 CARTER GROVE CIRCLE Address: City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition

Address: 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: KATE HENSLER DIRE 10/26/2009