FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000030814

GREY OAKS COMMUNITY SERVICES, INC.

Principal Place of Business Mailing Address						1	1 (2001 25) 1) \$ 14(25 1) \$1 52(1) \$4(1) \$4(1) \$6(1) \$1(1) \$					
2640 GOLDEN GATE PARKWAY P.O. BOX 413038 SUITE 115 NAPLES FL 34101								<u>_</u> _				
NAPLES FL 3410	05	US			,	DO NOT WRITE IN THIS SPACE						
US						3.	Date Incorporated or	Qualifed				
							04/27/1993					
	ace of Business	2a. Mailing Address				4.	FEI Number				pplied For	
2600	26					<u>65-0404980</u>				ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status I	Desired			Additional		
22		27			,	<u> </u>				Fee R	equired ·	
City & State	•	City & State			6.	Election Campaign F	inancing			May Be		
Napl	es, FL					Trust Fund Contribut	tion		Added	to Fees		
Zip	Country	Zip	Cou	ntry		8.	This corporation owe	es the curre	ent year Int	angible	1	
3410.	5 25 USA	29	30				Personal Property Ta	ax.		X Yes	□No	
	9. Name and Address of Current	Registered Agent				10.	Name and Address	of New R	egistered	Agent		
				81	Name							
MARI	inelli, paul j.			82	C++ (Address (D	O Boy Number is N	ot Acconto	hle)			
2600	GOLDEN GATE PARKWAY			02	Street	Address (P	O. Box Number is N	oi Accepia	DIG)			
STTE 200				83					-		•	
	LES FL 34105											
		•		84	City				FL	_ 85 Zip	Code	
44 Dureuant i	to the provisions of Sections 607.0502	and 607 1508. Florida Statut	es, the al	oove	-named o	corporation	n submits this stateme	ent for the	numose of	changing it	s registered	
office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was a ons of, Section 607.0505, Flo	uthorized rida Statu	by t	he corpo	oration's bo	oard of directors, I he	reby accep	t the appoi	ntment as r	egistered	
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re					signature re	equired when n		-0 -0 051	DATE	ID DIDECT	ODC IN 12	
12.	OFFICERS AND		13.		Т	- '	ADDITIONS/CHANGE	ES TO OFF	ICERS AF	Change		
TITLE	Р	☐ DELETE	1.1 111							Citoriange		
NAME	SANSBURY, THOMAS W			1.2 NAME								
STREET ADDRESS	DORESS 2600 GOLDEN GATE PKWY STE 200			1.3 STREET ADDRESS								
CITY-ST-ZIP	NAPLES FL 34105		1.4 CF	TY-ST	-ZiP							
TITLE	CD	☐ DELETE	2.1 TI	LE	!					☐ Change	Addition	
NAME	SPROUL JULIET C		2.2 NA	ME	1							
STREET ADDRESS	2600 GOLDEN GATE PARKWAY			2.3 STREET ADDRESS								
CITY-ST-ZIP	NAPLES FL			2, 4 CITY-ST-ZIP								
TITLE	TS .	☐ DELETE	3.1 717							Change	☐ Addition	
NAME	···			3.2 NAME								
	MARINELLI, PAUL J				ADDRESS							
STREET ADDRESS	2600 GOLDEN GATE PARKWAY											
CITY-ST-ZIP	NAPLES FL	☐ DELETE	3.4. CI 4.1 TII		-217	 				Change	Addition	
TITLE	D											
NAME	SPROUL, KATHERINE G		4. 2 N		1						j	
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		4.3 ST	REET	ADDRESS						1	
CITY-ST-ZIP	NAPLES FL		4.4 ÇI		-ZIP	 	·				□ Additi	
TITLE	AS	☐ DELETE	5.1 TO							Change	Addition	
NAME	CROWLEY, DAVID		5.2 NA								l	
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	STE 2200	5.3 ST	REET	ADDRESS	Suit	e 200				ſ	
C/TY-ST-Z/P	NAPLES FL		5.4 CI	TY-ST	-ZIP							
TITLE	D	☐ DELETE	6.1 TF	FLE						Change	Addition	
NAME	LYNTON, HAROLD S		6.2 NA	WE	ļ	[
STREET ADDRESS			6.3 ST	REET	ADDRESS							

14. I hereby certify that the information 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 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 occiver 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, with all other like empowered Thomas W. Sansbury, President 941 262-2600 3-30-99 SIGNATURE:

6.4 CITY-ST-ZIP

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90098 011 ***150.00

288367-90098-N P93000030814

OFFICER/ DIRECTOR	GREY OAKS COMMUNITY SERVICES, INC. (FEI #65-0404980)						
Р	Thomas W. Sansbury 2600 Golden Gate Parkway Naples, FL 34105						
S/T RA	Paul J. Marinelli 2600 Golden Gate Parkway Naples, FL 34105						
AS	David Crowley 2600 Golden Gate Parkway Naples, FL 34105						
C/D	Juliet C. Sproul 2600 Golden Gate Parkway Naples, FL 34105						
D	Katherine G. Spoul 2600 Golden Gate Parkway Naples, FL 34105						

Harold S. Lynton 2600 Golden Gate Parkway Naples, FL 34105

Lloyd Hendry 2600 Golden Gate Parkway Naples, FL 34105

D

p

1999 OFFICERS AND DIRECTORS