

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 9:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **V51002** (6)

1. Corporation Name  
**GREY OAKS REALTY, INC.**

Principal Place of Business Mailing Address  
**2640 GOLDEN GATE PARKWAY SUITE 115 NAPLES FL 33942**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/15/1992** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0347224** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
**21** **26** **P O Box 413038**

Suite, Apt. #, etc. Suite, Apt. #, etc.  
**22** **27**

City & State City & State  
**23** **Naples FL**

Zip Country Zip Country  
**24** **25** **33941** **29** **30** **Collier**

9. Name and Address of Current Registered Agent

**CORNELL, ANN T**  
**2640 GOLDEN GATE PARKWAY**  
**SUITE 115**  
**NAPLES FL 33942**

10. Name and Address of New Registered Agent

**81** Name  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**83**  
**84** City **FL** **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

Print name, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>CD</b>
NAME	<b>SPROUL, JULIE C</b>
STREET ADDRESS	<b>2800 GOLDEN GATE PARKWAY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>
TITLE	<b>PD</b>
NAME	<b>CAWLEY, ROY E JR</b>
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>
TITLE	<b>VP</b>
NAME	<b>BULLOCK, ROBERT Q</b>
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>
TITLE	<b>T</b>
NAME	<b>MARINELLI, PAUL J</b>
STREET ADDRESS	<b>2800 GOLDEN GATE PKWY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>
TITLE	<b>S</b>
NAME	<b>ANSLEY, CLARK</b>
STREET ADDRESS	<b>2800 GOLDEN GATE PARKWAY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>
TITLE	<b>AST</b>
NAME	<b>CORNELL, ANN T</b>
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>
CITY - ST - ZIP	<b>NAPLES FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(3)(b), 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: *Julie C. Sproul*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Julie C. Sproul, Chairman/Director**

4/18/95  
Date

813/262-2600  
(Toll-Free Number)

FLORIDA CORPORATION ANNUAL RETURN  
OFFICERS AND DIRECTORS  
FILING YEAR MAY 1, 1995

51002

KEY TITLE INITIALS	GREY OAKS REALTY, INC. (FEI # 65-0347224)
C = Chairman	C/D Juliet C. Sproul 2600 Golden Gate Parkway Naples, FL 33942
VC = Vice Chairman	
P = President	P/D Roy E. Cawley, Jr. 2640 Golden Gate Parkway Naples, FL 33942
V = Vice President	V Robert G. Bullock 2640 Golden Gate Parkway Naples, FL 33942
T = Treasurer	T Paul J. Marinelli 2600 Golden Gate Parkway Naples, FL 33942
S = Secretary	S Clark Ansley 2600 Golden Gate Prkwy Naples, FL 33942
AS = Assistant Secretary	AS/T Ann T. Cornell 2640 Golden Gate Parkway Naples, FL 33942
D = Director	D Katherine G. Sproul 2600 Golden Gate Parkway Naples, FL 33942
	D Juliet A. Sproul 2600 Golden Gate Parkway Naples, FL 33942
	D Jennifer V. Sproul 2600 Golden Gate Parkway Naples, FL 33942
RA = Registered Agent	RA Ann T. Cornell 2640 Golden Gate Parkway Naples, FL 33942