


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90110 030 ***150.00

DOCUMENT # V51002

1. Entity Name
GREY OAKS REALTY, INC.




Principal Place of Business
**2600 GOLDEN GATE PARKWAY
 NAPLES, FL 34105 US**

Mailing Address
**2600 GOLDEN GATE PARKWAY
 NAPLES, FL 34105 US**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

400010004



05012008 Chg-P CR2E034 (12/06)

4. FEI Number
65-0347224

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MARINELLI, PAUL J.
 2600 GOLDEN GATE PARKWAY
 NAPLES, FL 34105**

7. Name and Address of New Registered Agent

Name
BRADLEY A BOAZ

Street Address (P.O. Box Number is Not Acceptable)

City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Bradley A Boaz* **Bradley A Boaz** **5/1/08**
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	C/D SPROUL, JULIET C 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SANSBURY, THOMAS W 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DICKINSON, CAROLINE S 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/TS MARINELLI, PAUL J 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SPROUL, KATHERINE G 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SULLIVAN, JENNIFER S 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bradley A Boaz* **Bradley A Boaz** **5/1/08 (239) 262-2600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

ATTACHMENT TO 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V51002
ENTITY: GREY OAKS REALTY, INC.
FEI NUMBER: 65-0347224

40091921

ADDITIONAL OFFICERS AND DIRECTORS

TITLE:	S/T	
NAME	BRADLEY A BOAZ	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	
<hr/>		
TITLE:	AS/AT	
NAME	BRIAN L GOGUEN	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	
<hr/>		
TITLE:	D	
NAME	JULIET A SPROUL	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	