

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 PM 1:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N48016** (2)
1. Corporation Name
GREY OAKS PROPERTY OWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**2640 GOLDEN GATE PKWY
STE 115
NAPLES FL 33942**

3. Date Incorporated or Qualified **03/23/1992** 3a. Date of Last Report **05/01/1994**
4. FEI Number **65-0331728** Applied For
Not Applicable

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** **29** **33941** **30** **Collier**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**CORNELL, ANN
2640 GOLDEN GATE PKWY
STE 115
NAPLES FL 33942**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** **B5** 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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	BULLOCK, ROBERT Q
STREET ADDRESS	2640 GOLDEN GATE PARKWAY
CITY - ST - ZIP	NAPLES FL
TITLE	VD
NAME	MORTON, MARK
STREET ADDRESS	2640 GOLDEN GATE PARKWAY
CITY - ST - ZIP	NAPLES FL
TITLE	ST
NAME	CORNELL, ANN T
STREET ADDRESS	2640 GOLDEN GATE PARKWAY
CITY - ST - ZIP	NAPLES FL
TITLE	D
NAME	CAWLEY, ROY E JR
STREET ADDRESS	2640 GOLDEN GATE PARKWAY
CITY - ST - ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Robert Q. Bullock 04/18/95 813/262-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Robert Q. Bullock, President

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

NA 8014

GREY OAKS PROPERTY
OWNERS ASSOCIATION, INC.
(FEI # 65-0331728)

KEY TITLE INITIALS	
C = Chairman	P/D Robert G. Bullock 2640 Golden Gate Parkway Naples, FL 33942
VC = Vice Chairman	
P = President	
V = Vice President	V/D Mark Morton 2640 Golden Gate Parkway Naples, FL 33942
T = Treasurer	
S = Secretary	
AS = Assistant Secretary	S/T Ann T. Cornell 2640 Golden Gate Parkway Naples, FL 33942
D = Director	
	D Roy E. Cawley, Jr. 2640 Golden Gate Parkway Naples, FL 33942
RA = Registered Agent	
	RA Ann T. Cornell 2640 Golden Gate Parkway Naples, FL 33942