


FILE NOW: FILING FEE IS \$61.25

FILED  
May 12 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N48016** (2)  
1. Corporation Name  
**GREY OAKS PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business <b>2640 GOLDEN GATE PKWY STE 115 NAPLES FL 33942-</b>	Mailing Address <b>P.O. BOX 413038 NAPLES FL 34101-3038 US</b>
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/23/1992</b>	3a. Date of Last Report <b>05/01/1996</b>
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <b>65-0331728</b>		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23 Zip <b>34105</b> Country	28 Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24	29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

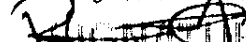
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>PIERCE, JAMES E 2600 GOLDEN GATE PKWY NAPLES FL 33942</b>				81 Name	<b>Roy E. Cawley, Jr.</b>		
				82 Street Address (P.O. Box Number is Not Acceptable)	<b>2600 Golden Gate Parkway</b>		
				83 Suite, Apt. #, etc.	<b>Suite 200</b>		
				84 City	<b>Naples</b>	85 State	<b>FL</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE:  **Roy E. Cawley, Jr. D** **04/18/97**  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BULLOCK, ROBERT Q</b>		1.2 NAME				
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>		1.3 STREET ADDRESS				
CITY - ST - ZIP	<b>NAPLES FL</b>		1.4 CITY - ST - ZIP				
TITLE	VD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PIERCE, JAMES E</b>		2.2 NAME				
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>		2.3 STREET ADDRESS				
CITY - ST - ZIP	<b>NAPLES FL</b>		2.4 CITY - ST - ZIP				
TITLE	ST	<input type="checkbox"/> DELETE	3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CROWLEY, DAVID</b>		3.2 NAME				
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>		3.3 STREET ADDRESS				
CITY - ST - ZIP	<b>NAPLES FL</b>		3.4 CITY - ST - ZIP				
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAWLEY, ROY E JR</b>		4.2 NAME				
STREET ADDRESS	<b>2640 GOLDEN GATE PARKWAY</b>		4.3 STREET ADDRESS	<b>2600 Golden Gate Parkway</b>			
CITY - ST - ZIP	<b>NAPLES FL</b>		4.4 CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY - ST - ZIP			5.4 CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY - ST - ZIP			6.4 CITY - ST - ZIP				

14. I do 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **ROY E. CAWLEY, JR.** **04/18/97** **941-262-2600**

CR2E037 (9/96)

1997 OFFICERS AND DIRECTORS

OFFICER/  
DIRECTOR      GREY OAKS PROPERTY  
OWNERS ASSOCIATION, INC.

P/D      Robert Q. Bullock  
2640 Golden Gate Parkway  
Naples, FL 34105

S/T      David Crowley  
2600 Golden Gate Parkway  
Naples, FL 34105

D  
RA      Roy E. Cawley, Jr.  
2600 Golden Gate Parkway  
Naples, FL 34105