

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000911

Entity Name: ESTUARY AT GREY OAKS PROPERTY OWNERS ASSOCIATION
INC.**FILED**
Feb 23, 2015
Secretary of State
CC6157329005**Current Principal Place of Business:**2386 GREY OAKS DRIVE N
NAPLES, FL 34105**Current Mailing Address:**2386 GREY OAKS DRIVE N.
NAPLES, FL 34103 US**FEI Number: 04-3627491****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BUTLER, JAMES
2400 GREY OAKS DRIVE NORTH
NAPLES, FL 34105 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VP
Name	YOUNG , PETER A
Address	2386 GREY OAKS DRIVE N
City-State-Zip:	NAPLES FL 34103

Title	SECRETARY
Name	AHEARN, GEORGE
Address	2386 GREY OAKS DRIVE N.
City-State-Zip:	NAPLES FL 34103

Title	TREASURER
Name	BARONE, BRUCE
Address	2386 GREY OAKS DRIVE N.
City-State-Zip:	NAPLES FL 34105

Title	PRESIDENT
Name	MCCLUTCHY, JOHN
Address	2386 GREY OAKS DRIVE N.
City-State-Zip:	NAPLES FL 34103

Title	PRESIDENT
Name	BUTLER, JAMES
Address	2400 GREY OAKS DRIVE N.
City-State-Zip:	NAPLES FL 34105

Title	DIRECTOR
Name	SUMEREL, ROBERT
Address	2386 GREY OAKS DRIVE N.
City-State-Zip:	NAPLES FL 34105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MCCLUTCHY , JOHN**PRESIDENT****02/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date