

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003599

Entity Name: GREY OAKS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6014 US HWY 19
SUITE 100
NEW PORT RICHEY, FL 34652**Current Mailing Address:**6014 US HWY 19
SUITE 100
NEW PORT RICHEY, FL 34652 US**FEI Number:** 59-3462191**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KELLEY, HELEN
6014 US HWY 19
SUITE 100
NEW PORT RICHEY, FL 34652 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:** HELEN KELLEY

04/06/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	JACOBSON, CHARLES
Address	6014 US HWY 19 SUITE 100
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	VP
Name	GONZALEZ, MICHAEL
Address	6014 US HWY 19 SUITE 100
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	DIRECTOR
Name	O'TOOLE, TERRENCE
Address	6014 US HWY 19 SUITE 100
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	SECRETARY
Name	MEDINA, CHARLES
Address	6014 US HWY 19 SUITE 100
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	TREASURER
Name	FUSCO, AL
Address	6014 US HWY 19 SUITE 100
City-State-Zip:	NEW PORT RICHEY FL 34652

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: CHARLES MEDINA**SECRETARY**

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date