

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000003599

**Entity Name:** GREY OAKS HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 06, 2021**  
**Secretary of State**  
**6068291060CC**

**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, TERENCE  
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