

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90319 007 ****61.25

DOCUMENT # N01000000912					
1. Entity Name ESTUARY AT GREY OAKS ESTATE NEIGHBORHOOD ASSOCIATION, INC.					
Principal Place of Business 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105			Mailing Address 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105		
2. Principal Place of Business - No P.O. Box # 4200 Gulf Shore Blvd. N. Suite, Apt. #, etc.		3. Mailing Address 4200 Gulf Shore Blvd. N. Suite, Apt. #, etc.			
City & State Naples, FL		City & State Naples, FL		4. FEI Number 04-3627478	
Zip 34103		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LUTGERT, KURT 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4200 Gulf Shore Blvd. N. City Naples FL Zip Code 34103		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE		Kurt Lutgert		4-24-08	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVAS MULLINS, LARRY <input checked="" type="checkbox"/> Delete 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS BAKER, RICHARD <input type="checkbox"/> Delete 4200 GULF SHORE BLVD N NAPLES, FL 34103		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LUTGERT, KURT <input type="checkbox"/> Delete 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105		TITLE NAME STREET ADDRESS CITY - ST - ZIP	4200 Gulf Shore Blvd. N. Naples, FL 34103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVT GUTMAN, HOWARD <input type="checkbox"/> Delete 4200 GULF SHORE BLVD N NAPLES, FL 34103		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:		Howard B. Gutman Vice President of General Partner		4/30/2008 (239) 261-6100	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	