

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90034 003 ****61.25

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1. Entity Name

GRAYS' COTTAGES PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

**3007 DER RD.
PLANT CITY FL 33566-0545**

Mailing Address

**3007 DER RD.
PLANT CITY FL 33566-0545**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

20003430



1st MOORE

CR2E037 (10/04)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRAY, HAROLD R
3007 DER RD.
PLANT CITY FL 33566-0545**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Harold R. Gray

Harold R. Gray, PD & Treasurer

1/25/05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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 PD ☒ Delete
NAME GRAY, HAROLD R
STREET ADDRESS 3007 DER RD.
CITY-ST-ZIP PLANT CITY FL 33566-0545

TITLE PD ☐ Change ☒ Addition
NAME COOPER, BENJAMIN, JR
STREET ADDRESS 821 ALASKA WOODS LANE
CITY-ST-ZIP ORLANDO, FL 32824

TITLE D ☒ Delete
NAME GRAY, NAOMI C
STREET ADDRESS 3007 DER RD.
CITY-ST-ZIP PLANT CITY FL 33566-0545

TITLE D ☐ Change ☒ Addition
NAME SMITH, RICHELLE
STREET ADDRESS 9909 HARTER-SMITH DRIVE
CITY-ST-ZIP LITHIA, FL 33547

TITLE D ☒ Delete
NAME GRAY, HAROLD R JR.
STREET ADDRESS 2305 SPRUCEWOOD LANE
CITY-ST-ZIP PLANT CITY FL 33563

TITLE S ☒ Change ☐ Addition
NAME GRAY, NAOMI C.
STREET ADDRESS 3007 DER RD.
CITY-ST-ZIP PLANT CITY, FL 33566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MD ☒ Change ☐ Addition
NAME GRAY, HAROLD R.
STREET ADDRESS 3007 DER RD
CITY-ST-ZIP PLANT CITY, FL 33566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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:

Harold R. Gray

Harold R. Gray

1/25/05

813 752 5269

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #