

FILED
Jun 04, 2007 8:00 am
Secretary of State

05-08-2007 90014 048 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N06000011418			
1. Entity Name GREYSTONE HOMEOWNERS ASSOCIATION OF LEON COUNTY, INC.			
Principal Place of Business 325 SOUTH BOULEVARD TAMPA, FL 33606		Mailing Address 325 SOUTH BOULEVARD TAMPA, FL 33606	
2. Principal Place of Business - Not P.O. Box # 4592 Ulmerton Road		3. Mailing Address 4592 Ulmerton Road	
Suite, Apt. #, etc. Suite 100		Suite, Apt. #, etc. Suite 100	
City & State Clearwater, FL		City & State Clearwater, FL	
Zip 33762		Zip 33762	
Country USA		Country USA	
4. FEI Number 20-5828329		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JAMES, JUDITH L 325 SOUTH BOULEVARD TAMPA, FL 33606		7. Name and Address of New Registered Agent 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 _____ Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	D HAYDON, ROGERS K JR. 325 SOUTH BOULEVARD TAMPA, FL 33606 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4592 Ulmerton Road, Suite 100 Clearwater, FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYDON, REED 325 SOUTH BOULEVARD TAMPA, FL 33606 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4592 Ulmerton Road, Suite 100 Clearwater, FL 33762
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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: _____ Rogers E. Haydon, Jr.		Date: 4/25/07 727-539-0777 Daytime Phone #	