

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50046

FILED  
Mar 29, 2010  
Secretary of State

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

**Current Principal Place of Business:**

2685 HORSESHOE DR. S  
SUITE #215  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

2685 HORSESHOE DR. S  
SUITE #215  
NAPLES, FL 34104 US

**New Mailing Address:**

**FEI Number:** 65-0347226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TEPAS, THOMAS  
2720 BUCKHORN WAY  
NAPLES, FL 34105 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TEPAS, THOMAS  
Address: 2720 BUCKTHORN WAY  
City-St-Zip: NAPLES, FL 34105

Title: VP  
Name: MILLS, DAVID  
Address: 2809 TARFLOWER WAY  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: BELL, JILL  
Address: 2825 TARFLOULER WAY  
City-St-Zip: NAPLES, FL 34105

Title: P  
Name: CUSICK, TOM  
Address: 2637 BULBUSH LANE  
City-St-Zip: NAPLES, FL 34105

Title: S  
Name: REYNOLDS, WILLIAM  
Address: 2438 INDIAN PIPE WAY  
City-St-Zip: NAPLES, FL 34105

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: THOMAS TEPAS

P

03/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date