

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 30, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P96000040161**1. Entity Name  
GREY OAKS DEVELOPMENT CORPORATION

## Principal Place of Business

2600 GOLDEN GATE PKWY

NAPLES  
34105

FL

US

## Mailing Address

PO BOX 413038

NAPLES  
34101

FL

US

## 2. Principal Place of Business

## 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

## 4. FEI Number

59-3386500

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

MARINELLI PAUL J.  
2600 GOLDEN GATE PARKWAY  
STE 200  
NAPLES  
34105

FL

US

## 7. Name and Address of New Registered Agent

Name

MARINELLI PAUL J.

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

2600 GOLDEN GATE PARKWAY

City  
NAPLES

FL

Zip Code  
34105

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.

SIGNATURE \_\_\_\_\_ 04/30/2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME HENDRY LLOYD  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 33942TITLE D ☒ Change ☐ Addition  
NAME HENDRY LLOYD  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 34105TITLE VAT ☐ Delete  
NAME CROWLEY DAVID C  
STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200  
CITY-ST-ZIP NAPLES FL 34105TITLE VAT ☒ Change ☐ Addition  
NAME GOGUEN BRIAN L  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 34105TITLE VST ☐ Delete  
NAME MARINELLI PAUL J  
STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200  
CITY-ST-ZIP NAPLES FL 34105TITLE VST ☒ Change ☐ Addition  
NAME MARINELLI PAUL J  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 34105TITLE P ☐ Delete  
NAME SANSBURY THOMAS W  
STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200  
CITY-ST-ZIP NAPLES FL 34105TITLE P ☒ Change ☐ Addition  
NAME SANSBURY THOMAS W  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 34105TITLE CD ☐ Delete  
NAME SPROUL JULIET C  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 33942TITLE CD ☒ Change ☐ Addition  
NAME SPROUL JULIET C  
STREET ADDRESS 2600 GOLDEN GATE PKWY  
CITY-ST-ZIP NAPLES FL 34105TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juliet C. Sproul

CD

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)