

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V30984

**Entity Name:** GREY OAKS COUNTRY CLUB, INC.**Current Principal Place of Business:**2400 GREY OAKS DR NORTH  
NAPLES, FL 34105**Current Mailing Address:**2400 GREY OAKS DR NORTH  
NAPLES, FL 34105 US**FEI Number:** 65-0347222**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES FOSTER SERVICE, LLC  
505 SOUTH FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 33401 US*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

**Officer/Director Detail :**

Title           TREASURER  
Name           TEPAS, THOMAS  
Address       2400 GREY OAKS DRIVE NORTH  
City-State-Zip: NAPLES FL 34105

Title           P, PRESIDENT  
Name           SCHREIER, BRAD  
Address       2400 GREY OAKS DRIVE NORTH  
City-State-Zip: NAPLES FL 34105

Title           CFO  
Name           SKELTON, JOY  
Address       2400 GREY OAKS DRIVE NORTH  
City-State-Zip: NAPLES FL 34105

Title           VP  
Name           SULLIVAN, JAMES  
Address       2400 GREY OAKS DR. N.  
City-State-Zip: NAPLES FL 34105

Title           SECRETARY  
Name           SCOTT, CYNTHIA  
Address       2400 GREY OAKS DR. N.  
City-State-Zip: NAPLES FL 34105

Title           COO  
Name           EMERY, DONALD  
Address       2400 GREY OAKS DRIVE N.  
City-State-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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOY SKELTON**CHIEF FINANCIAL  
OFFICERS****03/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date