

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90082 016 ****61.25

DOCUMENT # 768808

1. Entity Name
**GASLIGHT BUSINESS PARK CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**1937 10TH AVENUE NORTH
LAKE WORTH, FL 33461 US**

Mailing Address
**6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496**

40053261



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04042006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2297929

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**STAUFFER, LARRY
6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496**

Name
LARRY STAUFFER

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

3169 SW RIVERS END WAY

City
PAIM City

FL

Zip Code
34990

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 reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2006**

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
**VD
SCHMIDT, JUERGEN
1949 10TH AVE NORTH
LAKE WORTH, FL 33461** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
STAUFFER, LARRY
6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**LARRY STAUFFER
3169 SW RIVERS END WAY
PAIM City, FL 34990** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
BLUMEL, GEORGE
316 N. COUNTRY CLUB DR.
ATLANTIS, FL 33462** ☐ Delete

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

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☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/06

Date

772-219-1005

Daytime Phone #