## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L02000033964** 

1. Entity Name IN THE GAP INTERNATIONAL, L.L.C.



FILED
Mar 05, 2007 08:00 AM
Secretary of State

Principal Place of Business

C/O ANDREW K. JEPSON 674 TUSCORA DRIVE WINTER SPRINGS, FL 32708 Mailing Address

C/O ANDREW K. JEPSON 674 TUSCORA DRIVE WINTER SPRINGS, FL 32708



DO NOT WRITE IN THIS SPACE

02262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

×

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JEPSON, ANDREW K 674 TUSCORA DRIVE WINTER SPRINGS, FL 32708

## DO NOT WRITE IN THIS SPACE

		1	
	e named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or both, in the State of	Florida. I am lamiliar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	JEPSON, ANDREW K		
CTOCCT ADDRCOS	CZA TUCCODA DDIVE		

TITLE MGRM
JEPSON, ANDREW K
STREET ADDRESS
CITY-ST-ZIP
WINTER SPRINGS, FL 32708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE

U00000657162 03/14/07-80052-024 55.00

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Un

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP

andrew K. Jepson

Andrew K. JEPSON

3/01/07

(407) 927-1101

Daytime Phone #