

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2007 8:00 am**  
**Secretary of State**

02-19-2007 90058 024 \*\*\*\*70.00

**DOCUMENT # N06000004843**



1. Entity Name  
**GAP CREEK OFFICE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business  
**6204 98TH STREET EAST  
BRADENTON, FL 34202**

Mailing Address  
**6204 98TH STREET EAST  
BRADENTON, FL 34202**

40020330



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02052007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number

**20-4887647**

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

**SABA, RICHARD D  
2033 MAIN STREET SUITE 303  
SARASOTA, FL 34237**

7. Name and Address of New Registered Agent

Name **Elizabeth Thomason**

Street Address (P.O. Box Number is Not Acceptable) **9020 58th Drive East**

**Suite 101**

City **Bradenton**

**FL**

Zip Code **34202**

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

*Elizabeth Thomason*

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

(NOTE: Registered Agent signature required when reinstating)

**2/15/07**

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

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

TITLE ☐ Delete  
NAME **D LEHMAN, TIMOTHY P**  
STREET ADDRESS **9129 16TH AVENUE CIRCLE N.W.**  
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE ☐ Delete  
NAME **D THOMASON, ELIZABETH**  
STREET ADDRESS **6204 98TH STREET EAST**  
CITY-ST-ZIP **BRADENTON, FL 34202**

TITLE ☐ Delete  
NAME **D SMITH, D. BEMIS**  
STREET ADDRESS **301 17TH STREET EAST**  
CITY-ST-ZIP **BRADENTON, FL 34208**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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

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

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

*Elizabeth Thomason*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/15/07**

DATE

**941-752-3322**

DAYTIME PHONE #