

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000063370

Entity Name: GAPLYN SERVICES INC.

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

2480 PRESIDENTIAL WAY #601  
WEST PALM BEACH, FL 334011352

## **New Principal Place of Business:**

2480 PRESIDENTIAL WAY #601  
WEST PALM BEACH, FL 334011352 US

## **Current Mailing Address:**

23 DODIE STREET  
AURORA, ONTARIO, CANADA, ON L4G 2L1 CA

## **New Mailing Address:**

FEI Number: 26-0333325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

NICHOLS, JAMES L  
8191 COLLEGE PARKWAY  
#204  
FORT MYERS, FL 33919 US

## **Name and Address of New Registered Agent:**

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

## **OFFICERS AND DIRECTORS:**

Title: DR  
Name: FARQUHAR, RUSSELL  
Address: 23 DODIE STREET  
City-St-Zip: AURORA, ONTARIO, CANADA, ON L4G 2L1

Title: MRS  
Name: FARQUHAR, CAROL E  
Address: 23 DODIE STREET  
City-St-Zip: AURORA, ONTARIO, CANADA, ON L4G 2L1

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: RUSSELL FARQUHAR

DR

03/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date