

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000072986

Entity Name: GAPSS, INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

10508 SW PEACE RIVER STREET  
ARCADIA, FL 34269 US

**Current Mailing Address:**

P.O. BOX 512077  
PUNTA GORDA, FL 339512077 US

**New Mailing Address:**

FEI Number: 65-0448662

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRIS, ROBERT S  
10 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950 US

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

MORRIS, ROBERT S  
10508 SW PEACE RIVER STREET  
ARCADIA, FL 34269 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

04/28/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: MORRIS, ROBERT S  
Address: 10508 SW PEACE RIVER STREET  
City-St-Zip: ARCADIA, FL 34269

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: ROBERT S. MORRIS

PRES

04/28/2012

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

\_\_\_\_\_  
Date