

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000018317

1. Entity Name

GAPROP, INC.

FILED
Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90036 006 ***150.00

Principal Place of Business Mailing Address
46 N. WASHINGTON BLVD., #1 46 N. WASHINGTON BLVD., #1
SARASOTA FL 34236 SARASOTA FL 34236

2. Principal Place of Business 3. Mailing Address
2306 CANASTA DRIVE

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
BRADENTON BEACH FL

Zip Country Zip Country
34217 USA

4. FEI Number 65-0737812 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JACOBSON, SUE A
46 N. WASHINGTON BLVD., #1
SARASOTA FL 34236

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PSTD	<input checked="" type="checkbox"/> Delete	TITLE	D,P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEBHARD, DIETER H		NAME	PERRYMAN, IAN K.	
STREET ADDRESS	635 S ORANGE AVE, #10		STREET ADDRESS	2306 CANASTA DRIVE	
CITY-ST-ZIP	SARASOTA FL 34236		CITY-ST-ZIP	BRADENTON BEACH FL 34217	
TITLE		<input type="checkbox"/> Delete	TITLE	S,T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	PERRYMAN, JENNIFER	
STREET ADDRESS			STREET ADDRESS	2306 CANASTA DRIVE	
CITY-ST-ZIP			CITY-ST-ZIP	BRADENTON BEACH FL 34217	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER PERRYMAN (941) 779-1018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
JENNIFER PERRYMAN, Secretary/Treasurer

CR2E034 (9/99)