## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V11018

Entity Name: BALSAM GAP, INC.

FILED Mar 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

40 RANCH ROAD

THONOTOSASSA, FL 33592

Current Mailing Address: New Mailing Address:

40 RANCH ROAD

THONOTOSASSA, FL 33592

FEI Number: 59-3109263 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

THOMAS, ROBERT M.

50 RANCH ROAD

THOMAS, ROBERT M PRES
50 RANCH ROAD

THONOTOSASSA, FL 33592 US THONOTOSASSA, FL 33592 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: ROBERT M. THOMAS 03/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

Name:THOMAS, ROBERT M.,Name:THOMAS, ROBERT MAddress:50 RANCH ROADAddress:50 RANCH ROAD

City-St-Zip: THONOTOSASSA, FL 33592

 Name:
 THOMAS, SUSAN D
 Name:
 THOMAS, SUSAN D

 Address:
 40 RANCH ROAD
 Address:
 40 RANCH ROAD

City-St-Zip: THONOTOSSASSA, FL City-St-Zip: THONOTOSSASSA, FL 33592

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition

 Name:
 SIEVERS, CHRISTINA T
 Name:
 SIEVERS, CHRISTINA T

 Address:
 325 BLANCA AVE
 Address:
 325 BLANCA AVE

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT M.THOMAS PRES 03/06/2006