

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001815

**Entity Name:** G.P.O. CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 22, 2017**  
**Secretary of State**  
**CC1921575888**

**Current Principal Place of Business:**

SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779

**Current Mailing Address:**

SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779 US

**FEI Number: 59-3632947**

**Certificate of Status Desired: No**

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

SENTRY MANAGEMENT INC  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD , FL 32779 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: MARION RANZINO, ASSISTANT DIVISION MANAGER**

**04/22/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name WIDDIFIELD, ANN  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title PRESIDENT  
Name GERHARDT, ROBERT  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title VP  
Name CLAYTON, PETER  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title TREASURER  
Name LINDENBAUM, ANDREA  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR  
Name FRANKLIN, RICHARD  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR  
Name ZINSNER, DAVID  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR  
Name BRAZEAL, KEVIN  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR  
Name DRISCOLL, HELEN  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT GERHARDT**

**PRESIDENT**

**04/22/2017**

Electronic Signature of Signing Officer/Director Detail

Date