

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 148170

Entity Name: GAPWAY GROVE CORPORATION

Current Principal Place of Business:

505 AVENUE A NW
SUITE 219
WINTER HAVEN, FL 33881

Current Mailing Address:

PO BOX 1364
AUBURNDALE, FL 33823

FEI Number: 59-0805480

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRANG, JOHN W
505 AVENUE A NW
SUITE 219
WINTER HAVEN, FL 33881 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

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name STRANG, JOHN W
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title VP, DIRECTOR
Name STRANG, MAX W
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title VP, DIRECTOR
Name BASS, EVE S
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title VP, SECRETARY, TREASURER,
 DIRECTOR
Name STRANG, CARL J III
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name GARDNER, PETER
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name CARUSO, JAMES
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name STRANG, ZACHARY S
Address 505 AVENUE A NW
 SUITE 219
City-State-Zip: WINTER HAVEN FL 33881

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: JOHN W. STRANG

PRES

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date