2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008
Secretary of State

DOCUMENT# P03000009556

Entity Name: GATER ENTERPRISES INC.

Current Principal Place of Business:

519 ST GIRONS CT
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

519 ST GIRONS CT
PUNTA GORDA, FL 33950

New Mailing Address:

PO BOX 212004
BEDFORD, TX 76095

FEI Number: 03-0503664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, J DAVID EA
2511 VASCO STREET
SUITE 115
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MORRISON, TERESA
Address: 519 ST GIRONS CT.
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD ( ) Delete
Name: MORRISON, GARY
Address: 519 ST GIRONS CT.
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD ( ) Delete
Name: DU MEZ, JUDITH
Address: 3932 MADRID CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD ( ) Delete
Name: DU MEZ, JAMES
Address: 3932 MADRID CT
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TERESA MORRISON PD 03/07/2008

Electronic Signature of Signing Officer or Director — Date