## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11363

(9)

GATEWAY N.A. INCORPORATED

FILED Mar 18 1998 8:00am Secretary of State



						T ILLIA BLIADE INV DIBY DIA		ITA BYDUI MODA	
Principal Place of Business Mailing Address									
	CHENNAULT		4575 CLAIRE CHENNAULT						
SUITE 201	2000	SUITE 201							
DALLAS TX : US	75246	DALLAS TX 75248 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/09/1986			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		1 1.	- 11 - 3 89
21		26	26			43-1296208	43-1296208 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status I	s Desired \$8.75 Additional Fee Required		
City & Stat	to	City & State	City & State			6. Election Campaign F	inancing	\$5.00	May 8e
23		28	28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cour	ntry		8. This corporation owe	s or has paid the cu	rrent vear in	tangible
24	25	29	30			Personal Property Tax due June 30. Yes X No			
<del> </del>	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
Cī	CORPORATION SYSTEM			81	Name		<b></b>		
1200 S. PINE ISLAND ROAD			l						
			82 Street Ac			ss (P.O. Box Number is No	t Acceptable)		
n.	ANTATION FL 33324								
			- 1	63					
			ŀ	84	City		Fl	<b>85</b> Zip	Code
11 Purcuent	to the provisions of Sections 607.05	02 and 607 1509 Florida Statut	toe the ob	20110	named corns	ration submits this stateme			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typod or profed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGE:	S TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	FERREE, MICHAEL P.		1.1 TIT	1.1 TITLE			···	Change	Addition
NAME			1.2 NA	MF					
STREET ADDRESS					ODRESS				
	EDISCO TV				· · · ·				
CITY-ST-ZIP TITLE	8			Y-ST-	ZIP	- , = ",		F 3 65	27799
	FERREE, JOYCE 22			2.1 TITLE				Change	☐ Addition
NAME			2.2 NA	ME					1
STREET ADDRESS	11004 ORMOND LANE		2.3 STF	2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP					i
CITY-ST-ZIP	FRISCO TX		2. 4 Cl						
TITLE	DELETE 3.		3.1 TIT	LE		·.··		Change	☐ Addition
NAME	1		3.2 NA	ME				-	
STREET ADDRESS	RESS 2		1	3.3 STREET ADDRESS					
CITY-ST-ZIP	··			3.4. CITY-ST-ZIP					
TITLE			4.1 T(T)		CII.			Change	Addition
NAME								C. Criange	LI PODITORI
			4. 2 NA						j
STREET ADDRESS				reey ad					
CITY-ST-ZIP				Y-ST-	ZIP				
TITLE		☐ DELETE	5.1 TITI	LE	]			☐ Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 STF	REET AO	DDRESS				ł
CITY-ST-ZIP			5.4 CIT	Y-ST-	ZIP				ļ
TITLE	······································	☐ DELETE	6.1 TITI		<del></del>			Change	Addition
NAME			5.2 NA						
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STREET ADDRESS				reet ad					
CITY-ST-ZIP			6.4 CIT	Y-ST-	ZIP				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

972 - 735-96A