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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S81323

2a. Mailing Address

GATEWAY POLO & EQUESTRIAN CENTER, INC.

Principal Place of Business Mailing Address 12800 STATE ROAD 82 12800 STATE ROAD 82 FT. MYERS FL 33913 FT. MYERS FL 33913

26

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

09/17/1991

21		26				65-0288892	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				1	\$8.75	Additional
22		27	<u> </u>			5. Certificate of Status Desired	Fee Re	quired
City & State	•	City & State	City & State			6. Election Campaign Financing	\$5.00	Mav Be
23		28	28			Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip		untry		8. This corporation owes or has paid	the current year Into	angible
24	25	29	30			Personal Property Tax due June 30		No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
Ruedisueli, John P.					81 Name			
5108 SOUTHWEST 20TH AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)				
CAPE CORAL FL 33914								
				83				
				84	City		85 Zip 0	Code
				"	Ony	W-1	FL S Z S	5000
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, any accept the obligations of, Seption 607.0505, Florida Statutes.								
SIGNATURE .	(run P K	110/1/1/1/1	#:			•	1/1/97	
SIGNATORIE .	Stonature, typed or printed name of registered as in	and title if applicable.	(NOTE; Register	ed Ager	nt signature required	d when reinstating)	DATE	
12	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTOR	S IN 12
TITLE .	DELETE			1,1 TITLE			Change	Addition
NAME	Ruedisueli, John P.			1.2 NAME				[
STREET ADDRESS	5108 S.W. 20TH AVENUE			1.3 STREET ADDRESS				
CITY-ST-ZIP	CAPE CORAL FL			1.4 CITY-ST-ZIP				
TITLE	ST DELETE			2.1 TITLE			Change	Addition
NAME	RUEDISUELI, BETTY A.		221	AME	ĺ			
STREET ADDRESS	5108 S.W. 20TH AVENUE			2.3 STREET ADDRESS				
CITY-ST-ZIP	CAPE CORAL FL			CITY-S	T- ZIP			
TITLE	P DELETE			3.1 TITLE			Change	☐ Addition
NAME	Ruedisueli, jón s			3.2 NAME				1
STREET ADDRESS	12800 SR 82		3.3 9	3.3 STREET ADDRESS				
CITY - ST - ZIP	FT MYERS FL			3.4. CITY-ST-ZIP				
TITLE	☐ DELETE			4.1 TITLE		·	Change	Addition
NAME			4. 2	NAME				
STREET ADDRESS					ADDRESS			}
CITY - ST - ZIP				HTY-ST	1			
TITLE		DELE		ITLE	- 4II		Change	Addition
NAME			1	IAME	(
STREET ADDRESS					ADDRESS			j
			•		ſ			ţ
CITY - ST - ZIP TITLE		☐ DELE		ITY-ST	-414		Change	Addition
j.					1		- Outlide	realition
NAME			6.2 M					
STREET ADDRESS					ADDRESS			}
CITY-ST-ZIP	artify that the information complied with	h this filing door not a		ITY-ST		Section 119,07(3)(i), Florida Statutes, I fur	ther certify that the	information
indicated of	on this annual report or supplemental	annual report is true at ver or trustee empower	nd accurate ar red to execute	id tha	ıt mv signature	estion 113-07(3)(1), Florida Statutes, Times as shall have the same legal effect as if m red by Chapter 607, Florida Statutes; an	ade under oath: tha	ıtlamıan İ
SIGNATURE: Arthur P. Kurdinioth 1/7/97 941-549 5541								