

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039690

Entity Name: SAWGRASS GATEWAY CENTER, INC.**Current Principal Place of Business:**301 E. LAS OLAS BLVD.
FORT LAUDERDALE, FL 33301**Current Mailing Address:**301 E. LAS OLAS BLVD.
FORT LAUDERDALE, FL 33301 US**FEI Number: 65-1003480****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ESPOSITO, ROBERT
STILES CORPORATION
301 E. LAS OLAS BLVD.
FORT LAUDERDALE, FL 33301 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	DP
Name	STILES, TERRY W
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	VT
Name	EAGON, DOUGLAS P
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	VS
Name	ESPOSITO, ROBERT
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	V
Name	SIEGEL, DAVID
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	V
Name	FERRERA, ROCCO
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	V
Name	PALMER, STEPHEN R
Address	301 E. LAS OLAS BLVD.
City-State-Zip:	FORT LAUDERDALE FL 33301

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: ROBERT ESPOSITO**REGISTERED AGENT****02/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date