FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION **ANNUAL REPORT**



FLOR:DA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT #

(0)

GATEWAY TITLE AND ABSTRACT COMPANY

C/O WILLIA	CONGRESS AVENUE	Mating Address 111 NORTH CONGRI C/O WILLIAM BAKEI BOYNTON BEACH F	R		
2. Principal Place of Business				3. Date Incorporated or Qualified 07/08/1980	3a. Date of Last Report 08/09/1995
2. Principal Pl	ace or Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt #, etc.		59-2009435	Not Applicable
City & State		27 City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ 24	Country 25	Ζιρ 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s. 199.032,
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	egistered Agent
DIVEN	WHI I IARA		81 Name	-	
BAKER, WILLIAM 111 NORTH CONGRESS AVENUE			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
	HTH CONGRESS AVENUE ON BEACH FL 33436				
201111	ON DUNON FL 33430		83		
			84 City		85 Zp Code
familiar wit	h, and accept the obligations of, Sect Signature typed or protect name of regularizations	tion 607.0505, Florida Statute	S COL Highwest April Synton in a ma		intrient as registered agent. Lam
12.	PTD OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CLRS AND DIRECTORS IN 12 Change Addition
NAME	BAKER, WILLIAM	☐ DELETE	1 1 TITLE		Change Addition
STREET ADDRESS	111 N. CONGRESS AVE.		1.2 NAME		
CITY-ST-ZIP	BOYNTON BEACH FL		1.3 STREET ADORESS		
TITLE	VSD	DE: ETE	14 C/IV S1-7/2		
NAME	BAKER, DOROTHY	DECEM	2 1 ITILE 22 NAME		Change Addition
STREET ADDRESS	111 N. CONGRESS AVE.		2.2 NAM: 2.3 STHEET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL				
TITLE		DELET!	24 CHY ST-7#		Change Addition
NAME			3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 C-TY+S1+7IP		
TIFLE	4.	[] DELETE	4 1 T ILF		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP TITLE			4.4 CITY - \$1 - 7iP		
NAME		DEL ETE	5 1 TITLE		Change Addition
STREEL ADDRESS			5.2 NAME		
CITY-ST-ZIP			5 3 STREET ADDRESS		
TITLE		DELETE	5 4 City - St - ZiP		
NAME		C) Deter	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			63 STREET ADDRESS		
14. I do hereby certify that to oath; that I	certify that the information supplied with the information indicated on this annual am an officer or director of the corpor Block 12 or Block 13 if changed, or o	Californ On the receiver on to reter	contraportis are and accurate	r the exemption stated in Section 119.0 e and that my signature sha'l have the si report as required by Chapter 607, Fior	7(3)(k), Florida Statutes. I further ame legal effect as if made under ida Statutes, and that my name

SIGNATURE:

William J. Baker, President

May 31, 1996

561-734-6666

Date Daylam Project