FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

711071

(1)

GATEWAY MODEL RAILROAD CLUB, INC.											
Principal Place	of Business	Mailing Address				Ì	I 188 kil 1888 i 118 kil 1880 i 1880 i 1880 i 1880 i	1101 01011 010	### ##### ##### #		
1505 MARGARET ST JACKSONVILLE FL 32204		1505 MARGARET ST JACKSONVILLE FL 32204				,					
							3. Date incorporated or Qualified 06/21/1966		ate of Last F 05/01/1 9		
2. Principal Pla	ice of Business	2a. Mailing Address 26					FEI Number Applied For 59-1718169 Not Applicable				
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 24	Country 25	Z _I p	Coun	try			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			199.032,	
	Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
	1	81 Name									
ODER,RUSSELL G. 564 BOWIE BLVD.				82 Street Address			ess (P.O. Box Number is Not Acceptable)				
	PARK FL 32073				-		,				
				84	City			FL	85 Zip	Code	
or register	o the provisions of Sections 617.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section	a. Such change was authorize	ed by the co	e-na orpo	amed cor ration's b	rporatio board o	on submits this statement for the purp of directors. I hereby accept the appo	ose of cha intment as	anging its re registered	egistered office agent. I am	
SIGNATURE _			TE: Registered A			- Joseph . A	an electrical	DATE			
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	Qerit	signature re	squired wi	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	
TITLE	T OFFICERS AND	DELETE	1,1 7(1)	F		J'A			Change	Addition	
NAME	BRENNAN, LAWRENCE P		1.2 NA			-3 M	M C		_ •	_	
				1.3 STREET ADDRESS							
STREET ADDRESS	JACKSONVILLE FL		1.4 CH								
CITY-ST-ZIP TITLE	D D	DELETE	2.1 717		-211	SAME			Change	Addition	
NAME	oder, Russell G.		2.2 NA		1	24	, F1 C				
STREET ADDRESS	564 BOWIE BLVD.				ADDRESS						
CITY-ST-ZIP	ORANGE PARK FL		2 4 CI								
TITLE	D	DELETE	3 1 TIT			SA	ME		Change	☐ Addition	
NAME	ODER, DAVID		3.2 NA	MÉ	i						
STREET ADDRESS	564 BOWIE BLVD				ADDRESS						
CITY-ST-ZIP	ORANGE PARK FL		3.4. CI								
TITLE	S	DELETE	4.1 T/T			SAME			☐ Change	Addition	
NAME	VANDER YACHT, CLIFF		4. 2 NA	ME							
STREET ADDRESS	2363 LOURDES DR WEST		4.3 ST	REFT A	ADDRESS						
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CH								
TITLE	VP	™ DELETE	5.1 TIT			Ric	RICHARD NEW 16229 Shellcracker		Change	☐ Addition	
NAME	BUTCHER, RODNEY	 -	52 NA	ME		16					
STREET ADORESS	1714 FURMAN RD		53 ST	REET	ADDRESS	1 deconville El					
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CIT			Jucksonville FL					
TITLE	D	DELETE	6.1 TIT			SA	SAME		Change	Addition	
NAME	STAMEY, MICHAEL		6.2 NA	ME		,	• —				
STREET ADDRESS	9536 PRINCETON S BLVD 14	15	6.3 ST	REET.	address						
CITY-ST-ZIP	JACKSONVILLE FL		6.4 CI								
44 Lda barah		with this films in valuatorily fores				alify for	the exemption stated in Section 119.	07/3)/k) Et	orida Statut	es I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 each; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)