

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714453

FILED
Mar 19, 2009
Secretary of State

Entity Name: GATEWAY R/C CLUB, INC.

Current Principal Place of Business:

3461 LANNIE RD
JACKSONVILLE, FL 32218

New Principal Place of Business:

3461 LANNIE RD
JACKSONVILLE, FL 32218 US

Current Mailing Address:

3461 LANNIE RD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-2344068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLER, DAVID
3461 LANNIE ROAD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LANFRI, PATRICK
Address: 2305 CEDAR SHORES CIR
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD () Delete
Name: RYUS, HOLTON
Address: 43485 KEEN CEMETERY RD
City-St-Zip: CALLAHAN, FL 32011

Title: SD () Delete
Name: DAVIS, BOB
Address: 2730 HIDDEN VILLAGE DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: TD () Delete
Name: KELLER, DAVID
Address: 10105 SANDLER RD.
City-St-Zip: JACKSONVILLE, FL 32222

Title: DC (X) Delete
Name: HOWARD, BUFORD
Address: 5462 GREEN ST
City-St-Zip: CALLAHAN, RI 32011

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LANFRI, PATRICK
Address: 4743 SAPPHO AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: VD (X) Change () Addition
Name: ZEIGLER, JOHN
Address: 15481 TURKOMAN CIR
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD (X) Change () Addition
Name: ZIEGLER, DENISE
Address: 15481 TURKOMAN CIR
City-St-Zip: JACKSONVILLE, FL 32218

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID KELLER

TD

03/19/2009

Electronic Signature of Signing Officer or Director

Date