

FILE NOW: FILING FEE IS \$61.25

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FILED

Mar 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 734765 (1)</b> 1. Corporation Name <b>GATEWAY ESTATES PARK CONDOMINIUM ASSOCIATION, IN C.</b>			



Principal Place of Business <b>35250 SOUTH WEST 177TH COURT HOMESTEAD FL 33034-5699 US</b>	Mailing Address <b>13800 SW 144 AVE. ROAD MIAMI FL 33186 US</b>
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3. Date incorporated or Qualified <b>12/31/1975</b>
4. FEI Number <b>59-1644873</b>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. Principal Place of Business <b>21 LAND CAP PROPERTY SVS</b> Suite, Apt. #, etc. <b>22 13800 SW 144 AVE ROAD</b> City & State <b>23 MIAMI, FL</b> Zip <b>24 33186</b>	2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country <b>30</b>
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9. Name and Address of Current Registered Agent <b>SUITS, STEPHEN 13800 SW 144 AVENUE ROAD MIAMI FL 33186</b>	10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PATRICK, LLOYD 35250 SW 177TH CT #148 HOMESTEAD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STINGONE, ROBERT 35250 SW 177TH CT #189 HOMESTEAD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AKER, DONALD 35250 SW 177TH CT #156 HOMESTEAD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, ROBERT J. 35250 SW 177TH CT., #107 HOMESTEAD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WARNER, DONALD 35250 SW 177TH COURT HOMESTEAD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* (305)245-7380 3/9/98

CF2E037 (10/97)