## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 755545**

FILED Feb 29, 2008 Secretary of State

Entity Name: GATEWAY WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

HARBOR MGMT SERVICE 15600 SW 288 ST #406 HOMESTEAD, FL 33033 US

Current Mailing Address: New Mailing Address:

PO BOX 924176

HOMESTEAD, FL 33092 US

FEI Number: 59-2046976 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROGEL, DAVID H ESQ. BECKER & POLIAKOFF, P.A. 121 ALHAMBRA PLAZA, 10TH FLOOR CORAL GABLES, FL 33134 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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P ( ) Delete
 Title:
 P (X) Change ( ) Addition

 Name:
 CARLSON, WAYNE
 Name:
 MALLETTE, BILL

 Address:
 3503 SW 180TH AVE 395
 Address:
 15600 SW 288 STREET, #406

City-St-Zip: HOMESTEAD, FL 33034 City-St-Zip: HOMESTEAD, FL 33033

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: REILLY, JAMES REILLY, JAMES

 Address:
 35303 SW 180 AVE 318
 Address:
 15600 SW 288 STREET, #406

 City-St-Zip:
 HOMESTEAD, FL 33034
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: TD () Delete Title: TD (X) Change () Addition Name: REMOND, RON Name: REDMOND, RON

 Address:
 35303 SW 180 AVE 313
 Address:
 15600 SW 288 STREET, #406

 City-St-Zip:
 HOMESTEAD, FL 33034
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: MORGAN, GLENN Name: CARLSON, WAYNE

 Address:
 35303 SW 180 AVE 324
 Address:
 15600 SW 288 STREET, #406

 City-St-Zip:
 HOMESTEAD, FL 33034
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: ( ) Delete Title: D ( ) Change (X) Addition

Name: Name: MORGAN, GLENN

 Address:
 Address:
 15600 SW 288 STREET, #406

 City-St-Zip:
 City-St-Zip:
 HOMESTEAD, FL 33033

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: BILL MALLETTE P 02/29/2008