

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

425/16

DOCUMENT # A25391

1. Entity Name

Gateway Tax Credit Fund, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY -2 PM 12:45

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

880 Carillon Parkway

Suite, Apt. #, etc.

3. Mailing Address

PO Box 12749

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-2852555

Applied For

Not Applicable

Zip

33716

Country

USA

Zip

33733-2749

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Raymond James Tax Credit Funds, Inc.

Street Address (P.O. Box Number is Not Acceptable)

880 Carillon Parkway

City

St. Petersburg

FL

Zip Code

33716

**DO NOT WRITE
IN THIS SPACE**

8. 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

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

DATE

9. Capital Contributions
as Shown on record.

\$50,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #	J96725	STREET ADDRESS	400005576894--5
NAME	Raymond James Tax Credit Funds, Inc.	CITY-ST-ZIP	-05/21/02--01041--005
STREET ADDRESS	880 Carillon Pkwy		*****526.25 *****526.25
CITY-ST-ZIP	St. Petersburg, FL 33716		
DOCUMENT #	J96712	STREET ADDRESS	
NAME	Raymond James Partners, Inc.	CITY-ST-ZIP	
STREET ADDRESS	880 Carillon Pkwy		
CITY-ST-ZIP	St. Petersburg, FL 33716		
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
CITY-ST-ZIP			

**DO NOT WRITE
IN THIS SPACE**

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Carol Georges
Carol Georges, Vice President, RJTCF, Inc.

4/26/02

(727) 573-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

CR2E003B (12/01)