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

DOCUMENT#

A93000001426

1. Entity Name

SECRETARY OF STATE DIVISION OF CORPORATIONS

MAY -2 PH 12: 42

Gateway Institutional Tax Credit Fund LTD.				02 MAY -2 11112	
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business		3. Mailing Address		DO NOT WRITE IN THIS SPACE	
880 Carillon Parkway Suite, Apt. #, etc.		PO Box 12749 Suite, Apt. #, etc.			
				DUE BY MAY 1	
City & State St. Petersburg, FL		City & State St. Petersburg, FL		4. FEI Number Applied For S9-3216295 Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional	
33716	USA	33733-2749	USA	Fee Required 7. Name and Address of Current Registered Agent	
				mond James Tax Credit Funds, Inc.	
DO NOT WRITE			Street A	Street Address (P.O. Box Number is Not Acceptable)	
IN THIS SPACE				880_Carillon_Parkway	
			City St.	Petersburg FL Zip Code 33716	
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					
9. Capital Cor as Shown o		10. Amount of Capital in FLORIDA to dat		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 MINISTRA J96712					
DOCUMENT # NAME	Raymond James Partners, Inc. St		STREET ADDRESS		
STREET ADORESS CITY-ST-ZIP	880 Carillon Pkwy St. Petersburg, FL	33716	CITY-ST-ZIP	-05/21/0201041002 ****526.25 *****526.25 {	
DOCUMENT #	J96725 Raymond James Cred	lit Partners, In	STREET ADDRESS	****526.25 ****526.25 {6	
STREET ADDRESS CITY-ST-ZIP	880 Carillon Pkwy St. Petersburg, FL		CITY-ST-ZIP		
DOCUMENT # NAME			STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			C/TY-ST-ZIP	DO NOT WRITE	
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STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
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STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT # NAME ()			STREET ADDRESS		
STREET ADDRESS CITY ST-ZIP			CITY-ST-2IP		

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:

STAPLE CHECK HERE

Carol Georges, Vice President, RJTCF,

(727) 573-3800