# 2006 LIMITED PARTNERSHIP ANNUAL REPORT
**Due By May 1, 2006**

**FILED**
**Mar 10, 2006 08:00 AM**
**Secretary of State**

DOCUMENT # A96000000311

1. Entity Name
GATEWAY INVESTORS, LTD.

Principal Place of Business
2033 WOOD ST., STE. 118
SARASOTA, FL 34237

Mailing Address
P.O. BOX 5335
SARASOTA, FL 34277-5335

01182006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number
65-0655404
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GULF COAST PROPERTY SERVICES, INC.
2033 WOOD ST., STE. 118
SARASOTA, FL 34237

**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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS $500.00**
**After May 1, 2006, Fee will be $900.00**

000000461647
03/21/06-80005-003 500.00

**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 # | H80044 |
| NAME | GULF COAST PROPERTY SERVICES, INC. |
| STREET ADDRESS | 2033 WOOD ST., STE. 118 |
| CITY-ST-ZIP | SARASOTA, FL 34237 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| CITY-ST-ZIP | |

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** [signature] - Pres 1/18/06 9419232114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #