


500.00

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

| | | | | | |
|--|--------------------------------------|---------|--|---|---------|
| DOCUMENT # A97000001297 | | | |  | |
| 1. Entity Name GATEWAY CENTER ECONOMIC DEVELOPMENT PARTNERSHIP, LTD. | | | | | |
| Principal Place of Business 5258 NORWOOD AVENUE #12 JACKSONVILLE, FL 32208 | | | Mailing Address 5258 NORWOOD AVENUE #12 JACKSONVILLE, FL 32208 | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | Zip | | Country |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| | | | Name Ronald B. Austin, Esq. | | |
| | | | Street Address (P.O. Box Number is Not Acceptable) 1400 Prudential Dr. | | |
| | | | Ste. #1 | | |
| | | | City Jacksonville FL Zip Code 32207 | | |
| 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 9/1/06 | | | | | |
| Signature, typed or printed name of registered agent and date if applicable. | | | | | |
| FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006 | | | | | |
| In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice. | | | | | |
| 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 | | | 13. ADDRESS CHANGES ONLY | | |
| DOCUMENT # | P97000051833 | | STREET ADDRESS | | |
| NAME | RENAISSANCE DESIGN BUILD GROUP, INC. | | CITY - ST - ZIP | | |
| STREET ADDRESS | 2800 RIVERSIDE AVENUE | | | | |
| CITY - ST - ZIP | JACKSONVILLE, FL 32207 | | | | |
| DOCUMENT # | M82686 | | STREET ADDRESS | 000078976480 | |
| NAME | COLBYCO ENTERPRISES, INC. | | CITY - ST - ZIP | 08/22/06--01016--002 **1261.25 | |
| STREET ADDRESS | 2800 RIVERSIDE AVENUE | | | | |
| CITY - ST - ZIP | JACKSONVILLE, FL 32207 | | | | |
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| STREET ADDRESS | | | | | |
| CITY - ST - ZIP | | | | | |
| 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:  DATE 8/10/06 DAYTIME PHONE # 904-7647145 | | | | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER | | | | | |