2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002882

Entity Name: GATEWAY COMPUTERS, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
610 GATEWAY DRIVE NORTH SIOUX CITY, SD 57049					
Current Mailing Address:			New Mailing Address:		
TAX DEPA	VAY PLACE RTMENT Y-15 DUX CITY, SD	57049			
FEI Number:	42-1249184	FEI Number Applied For () FEI Num	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VPT () E WEST, NEAL 7565 IRVINE CEN IRVINE, CA 9261		Title: Name: Address: City-St-Zip:	SVP (X) Change () Addition DAVIDSON, ROBERT V 7565 IRVINE CENTER DR IRVINE, CA 92618	
Title: Name: Address: City-St-Zip:	STVP () E DAVIDSON, ROB 7565 IRVINE CEN IRVINE, CA 9261	ITER DR.	Title: Name: Address: City-St-Zip:	SECR (X) Change () Addition THOMAS, C.TEIGUE V 7565 IRVINE CENTER DR. IRVINE, CA 92618	
Title: Name: Address: City-St-Zip:	S () E CALLE, CRAIG 7565 IRVINE CEN IRVINE, CA 9261		Title: Name: Address: City-St-Zip:	TREA (X) Change () Addition KING, JOHN 7565 IRVINE CENTER DR IRVINE, CA 92618	
Title: Name: Address: City-St-Zip:	D () E GIANFRANCO, LA 7565 IRVINE CEN IRVINE, CA 9261	ITER DR.	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition LANCI, GIANFRANCO 7565 IRVINE CENTER DR. IRVINE, CA 92618	
Title: Name: Address: City-St-Zip:	D () E SCHMIDLEISTHN 7565 IRVINE CEN IRVINE, CA 9261	ITER DR.	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition SCHMIDLEITHNER, RUDOLF 7565 IRVINE CENTER DR. IRVINE, CA 92618	
Title: Name: Address: City-St-Zip:	D () E WANG, J.T. 7565 IRVINE CEN IRVINE, CA 9261		Title: Name: Address: City-St-Zip:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN KING TREA 04/23/2009