2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2008
Secretary of State

DOCUMENT# F03000005883

Entity Name: GATEWAY BUSINESS BANK, CORPORATION

Current Principal Place of Business:

18000 STUDEBAKER ROAD, SUITE 550
CERRITOS, CA 90703

New Principal Place of Business:

Current Mailing Address:

1403 NORTH TUSTIN AVENUE, SUITE 280
SANTA ANA, CA 92705

New Mailing Address:

FEI Number: 86-0730601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	TARBELL, RONALD	
Address:	1403 N. TUSTIN AVENUE, SUITE 280	
City-St-Zip:	SANTA ANA, CA 92705	
Title:	D	( ) Delete
Name:	CLLIPPINGER, ROBERT W	
Address:	30131 TOWN CENTER DRIVE, SUITE 242	
City-St-Zip:	LAGUNA NIGUEL, CA 92677	
Title:	D	( ) Delete
Name:	JAKOBI, PHIL F	
Address:	6238 NAPOLI COURT	
City-St-Zip:	LONG BEACH, CA 90803	
Title:	D	( ) Delete
Name:	LIPINSKI, KENNETH A	
Address:	2424 S.E. BRISTOL, 2ND FLOOR	
City-St-Zip:	NEWPORT BEACH, CA 92660	
Title:	D	( ) Delete
Name:	ALVARADO, RAYMOND G	
Address:	4 PART PLAZA, SUITE 1200	
City-St-Zip:	IRVINE, CA 92614	
Title:	D	( ) Delete
Name:	OSTLUND, SCOTT	
Address:	3535 INLAND EMPIRE BLVD.	
City-St-Zip:	ONTARIO, CA 91764	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: MARSHA BONITI SEC 07/23/2008

Electronic Signature of Signing Officer or Director — Date