

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005883

FILED
Apr 22, 2009
Secretary of State

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

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: CLIPPINGER, 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
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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

VP

04/22/2009

Electronic Signature of Signing Officer or Director

Date