2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE

Mar 20, 2008 8:00 am Secretary of State **DOCUMENT # F07000000514** 03-20-2008 90025 031 ***150 00 1. Entity Name GATEWAY MONROE, INC. Principal Place of Business Mailing Address 300 N LAKE AVE - STE 620 300 N LAKE AVE - STE 620 50000143 PASADENA, CA 91101 PASADENA, CA 91101 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172008 CB2F034 (12/06) Cha-P Applied For City & State City & State 4. FEI Number 95-4632436 Not Applicable Zip Country Zίο Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent CORPORATE NATIONAL GORPROATE RESEARCH, LTD. Name Street Address (P.O. Box Number is Not Acceptable) 515 E PARK AVE TALLAHASSEE, FL 32301 Zip Code FI 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 -Signature, typed or printed game of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. W. 1 PTD ☐ Addition TITLE Delete TITLE RADEMACHER, GREGG NAME NAME STREET ADDRESS 300 N LAKE AVE - STE 620 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PASADENA, CA 91101 TITLE CEO ☐ Delete Change ☐ Addition RADEMACHER, GREGG NAME NAME 300 N LAKE AVE - STE 620 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PASADENA, CA 91101 CITY-ST-ZIP TITLE __ Delete TITLE **VS** T Change ☐ Addition SCHULER, MARGARET O NAME NAME Margaret Shuler STREET ADDRESS 300 N LAKE AVE - STE 620 STREET ADDRESS 300 N Lake Ave ste 620 CITY-ST-ZIP PASADENA, CA 91101 CiTY-ST-ZIE Pasadena CA 91101 TITLE Delete TITLE Change ☐ Addition ٧ MUIR, DAVID L NAME NAME David Muir STREET ADDRESS 300 N LAKE AVE - STE 620 STREET ADDRESS 300 N Lake Ave Ste 620 CITY-ST-ZIP PASADENA, CA 91101 CMY-ST-ZIP Pasadena CA 91101 TITLE Delete TITLE ☐ Change ☐ Addition MUIR, DAVID L NAME NAME 300 N LAKE AVE - STE 620 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP PASADENA, CA 91101 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME Janice Golden STREET ADDRESS STREET ADDRESS 300 N Lake Ave Ste 620 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receipter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MARGARET O SHULER VICE PRESIDENT & SECRETARY

G OFFICER OR DIRECTOR

FILED