## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

TYPED OR PRINTED NAME

SIGNING OFFICER OR DIRECTOR

## Feb 09, 2001 8:00 am Secretary of State DOCUMENT # F9400003846 GATEWAY FLORIDA PROPERTIES, INC. 02-09-2001 90212 020 \*\*\*150.00 Principal Place of Business Mailing Address 300 NORTH LAKE AVENUE 300 NORTH LAKE AVENUE SUITE 620 SUITE 620 PASADENA CA 91101 PASADENA CA 91101 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE لا پخورسوسال ال City & State City & State Applied For 4. FEI Number 95-4486698 Not Applicable Zip Country 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 Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 EAST PARK AVENUE** TALLAHASSEE FL 32301 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 - .... 110. Election Campaign Financing - - / \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PCDT** TITLE ☐ Delete TITLE PTD Change Addition NAME RICHTER, MARSHA D NAME Richter, Marsha D. STREET ADDRESS 300 NORTH LAKE AVE, SUITE 620 STREET ADDRESS 300 N. Lake Ave., Suite 620 CITY-ST-ZIP PASADENA CA 91101 CITY-ST-ZIP Pasadena, CA 91101 ☐ Delete TITLE Change ☐ Addition NAME MUIR, DAVID L NAME STREET ADDRESS 300 NORTH LAKE AVE, SUITE 620 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PASADENA CA 91101 TITLE ☐ Delete TITLE Change Addition NAME SHULER, MARGARET O NAME STREET ADDRESS 300 NORTH LAKE AVE SUITE 620 STREET ADDRESS CITY-ST-ZIP PASADENA CA 91101 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME RADEMACHER, GREGG NAME STREET ADDRESS 300 NORTH LAKE AVE SUITE 620 STREET ADDRESS CITY-ST-ZIP PASADENA CA 91101 CITY-ST-ZIP VAST TITLE □ Delete Change [ ] Addition NAME BUEHNER, EARL W STREET ADDRESS 300 NORTH LAKE AVE., STE. 620 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP PASADENA CA 91101 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. MARCART R CHILLED

MARGARET O. SHULER Vice pr<u>esident & secretary</u> FILED