

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # F95000006150	
1. Entity Name GATEWAY SOUTHEAST PROPERTIES, INC.	

Principal Place of Business 300 NORTH LAKE AVENUE SUITE 620 PASADENA, CA 91101 US	Mailing Address 300 NORTH LAKE AVENUE SUITE 620 PASADENA, CA 91101 US
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DO NOT WRITE IN THIS SPACE



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 95-4556237	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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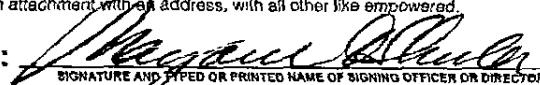
10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS BUEHNER, EARL W 300 NORTH LAKE AVE STE 620 PASADENA, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RADEMACHER, GREGG 300 NORTH LAKE AVE STE 620 PASADENA, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SHULER, MARGARET O 300 NORTH LAKE AVE STE 620 PASADENA, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MUIR, DAVID L 300 NORTH LAKE AVE STE 620 PASADENA, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD RICHTER, MARSHA D 300 N LAKE AVE STE 620 PASADENA, CA 91101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000469496
03/27/06-80003-001 75.00

U00000469496
03/27/06-80003-002 75.00

12. I hereby certify that the information supplied with this filing does not qualify 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 receiver 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.

SIGNATURE:  **MARGARET O SHULER**
VICE PRESIDENT & SECRETARY
Date: **1/9/06** Daytime Phone #: **626 564-2343**