PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # F96000000498

GATEWAY FLORIDA, INC.

			_			
Principal Place of Business Mailing Address						
1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00		250 STADIUM PLAZA ST LOUIS MO 63102				
ST PETERSBURG FL 33701 ST LOUIS MO 63102 US US			DO NOT WRITE IN THIS SPACE			
100				3. Date Incorporated or Qualifed		
				01/30/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Apr	plied For
21		26		43-1730186	Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
22	•	27		3. Certificate of Status Desired	Fee Red	quired
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00	
23		28		Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country	8. This corporation owes the current year		٦
24	25	1=-	30	Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registers	d Agent	
C.T.	CODDODATION SYSTEM		81 Name			1
C T CORPORATION SYSTEM			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					
PLAN	41A11014 FL 33324		83			
			84 City		. 85 Zip C	ode
					L	
11. Pursuant	to the provisions of Sections 607.056	.)2 and 607.1508, Florida Statute of Florida, Such change was a	es, the above-named corp athorized by the corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its oointment as rec	registered gistered
agent. I a	im familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes.	,,		
SIGNATURE						
	Signature, typed or printed name of registered agr		Registered Agent signature require 13.	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	PS IN 12
12.		ND DIRECTORS DELETE	1.1 TITLE	ADDITIONS/CITANGES TO OTH TOLING	Change	Addition
TITLE	CV	E DELETE				
NAME	DEWITT, WILLIAM O JR.		1.2 NAME			
STREET ADDRESS	250 STADIUM PLAZA		1.3 STREET ADDRESS			
CITY-ST-ZIP	ST LOUIS MO	Closusts	1.4 CITY-ST-ZIP		Change	Addition
TITLE	DP	☐ DELETE	2.1 TITLE		Change	
NAME	HANSER, FREDERICK O		22 NAME			
STREET ADDRESS	250 STADIUM PLAZA		2.3 STREET ADDRESS			
CITY-ST-ZIP	ST. LOUIS MO	☐ DELETE	2. 4 CITY-ST-ZIP	<u> </u>	☐ Change	Addition
TITLE	DST	ויין טבוב וב	3.1 TITLE		change	
NAME	BAUR, ANDREW N		3.2 NAME			
STREET ADDRESS	250 STADIUM PLAZA		3.3 STREET ADDRESS			
CITY-ST-ZIP	ST. LOUIS MO	O RELETE	3.4. CITY-ST-ZIP		☐ Change	Addition
TITLE	V	☐ DELETE	4.1 TITLE		C) Griange	
NAME	WOOD, BRADFORD S		4, 2 NAME			
STREET ADDRESS	250 STADIUM PLAZA		4.3 STREET ADDRESS			
CITY-ST-ZIP	ST LOUIS MO	T DELETE	4.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME			
NAME	•					
STREET ADDRESS	i		5.3 STREET ADDRESS			

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 excute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attrogram with a reddress, with a other life empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90157 023 ***158.75

A CHANGHA TOTA TRICA RICES AND HAND BATCH BATCH ARTER CORN ATAIN TOTAL REGISTRA

Daytime Phone #

☐ Change

☐ Addition