


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 08, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F99000001349</b>	
<b>1. Entity Name</b> GATEWAY GP SAWGRASS MILLS, INC.	

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



02252004 No Chg-P CR2E034 (10/03)

<b>4. FEI Number</b> 95-4729380	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

NATIONAL CORPORATE RESEARCH, LTD., INC.  
103 N. MERIDIAN STREET  
TALLAHASSEE, FL 32301-0000

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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** \_\_\_\_\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	U000000082029 03/09/04-80010-024 150.00
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**10. OFFICERS AND DIRECTORS**

<b>TITLE</b>	PCDT
<b>NAME</b>	RICHTER, MARSHA D
<b>STREET ADDRESS</b>	300 NORTH LAKE AVENUE, STE 620
<b>CITY - ST - ZIP</b>	PASADENA, CA
<b>TITLE</b>	V
<b>NAME</b>	RADEMACHER, GREGG
<b>STREET ADDRESS</b>	300 NORTH LAKE AVENUE, STE 620
<b>CITY - ST - ZIP</b>	PASADENA, CA
<b>TITLE</b>	VS
<b>NAME</b>	SHULER, MARGARET O
<b>STREET ADDRESS</b>	300 NORTH LAKE AVENUE, STE 620
<b>CITY - ST - ZIP</b>	PASADENA, CA
<b>TITLE</b>	V
<b>NAME</b>	MUIR, DAVID L
<b>STREET ADDRESS</b>	300 NORTH LAKE AVENUE, STE 620
<b>CITY - ST - ZIP</b>	PASADENA, CA
<b>TITLE</b>	VAST
<b>NAME</b>	BUEHNER, EARL W
<b>STREET ADDRESS</b>	300 NORTH LAKE AVENUE, STE 620
<b>CITY - ST - ZIP</b>	PASADENA, CA
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

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**12.** 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 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

3/4-04 626  
564-2342  
Date Daytime Phone #