

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**May 16, 2000 8:00 am**  
**Secretary of State**

05-16-2000 90034 008 \*\*\*150.00

**DOCUMENT # F99000004720**

1. Entity Name

**TCR GATEWAY, INC.**

Principal Place of Business

Mailing Address

717 NORTH HARWOOD, SUITE #1200, LB128  
DALLAS TX 75201717 NORTH HARWOOD, SUITE #1200, LB128  
DALLAS TX 75201-6516

2. Principal Place of Business

**201 N. New York Ave.**

3. Mailing Address

**201 N. New York Ave.**

Suite, Apt. #, etc.

**Suite 200**

Suite, Apt. #, etc.

**Suite 200**

City &amp; State

**Winter Park, FL**

City &amp; State

**Winter Park, FL**

Zip

**32789**

Country

**US**

Zip

**32789**

Country

**US**

4. FEI Number

**75-2837047**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	HOEKSEMA, DOUGLAS A	541 SOUTH ORLANDO AVE., SUITE 210	MAITLAND FL 32751	<input type="checkbox"/>
V	TERWILLIGER, J. RONALD	2859 PACES FERRY ROAD, SUITE 1100	ATLANTA GA 30339	<input type="checkbox"/>
V	COLLINS, MICHAEL	1810 GATEWAY DRIVE, SUITE #100	SAN MATEO CA 94404	<input type="checkbox"/>
V	CROW, HARLAN R	2001 ROSS AVENUE. #3200	DALLAS TX 75201	<input type="checkbox"/>
VAT	PATTERSON, THOMAS J	717 NORTH HARWOOD, SUITE #1200, LB128	DALLAS TX 75201	<input type="checkbox"/>
VST	PACE, RANDY J	717 NORTH HARWOOD, SUITE #1200, LB128	DALLAS TX 75201	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		201 N. New York Ave., Suite 200	Winter Park, FL 32789	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	VT			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	VS			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)