

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # K49687
 1. Entity Name
GATEWAY VENTURES, INC.



Principal Place of Business Mailing Address
6518 W. HIGHWAY 98 **6518 W. HIGHWAY 98**
PANAMA CITY BEACH, FL 32407 US **PANAMA CITY BEACH, FL 32407 US**

DO NOT WRITE IN THIS SPACE



03292005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2920154	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WHALEY, WM J
6518 W. HIGHWAY 98
PANAMA CITY BEACH, FL 32407

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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, 2005 Fee will be \$350.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

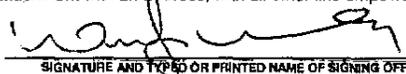
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TRENT, NOLA ANN 2422 MAGNOLIA DR PANAMA BEACH CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TRENT, NOLA ANN 2422 MAGNOLIA DR. PANAMA CITY BCH FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DICKENS, HAROLD W. 2304 COCHRAN AVE. PANAMA CITY BCH FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHALEY, WILLIAM 5019 N LAGOON DR PANAMA CITY BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/20/05-80006-010 150.00

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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)(d), 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:  **WM J. WHALEY** Date: **4-15-05** Daytime Phone #: **850 234-2114**