


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

7/3

FILED
Sep 02, 2008 8:00 am
Secretary of State

07-30-2008 90029 001 ***150.00

09-02-2008 90032 001 ***400.00

DOCUMENT # L20065	
1. Entity Name GATEWAY ASSIGNOR CORPORATION, INC	

Principal Place of Business 880 CARILLON PARKWAY ST. PETERSBURG, FL 33716	Mailing Address
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DO NOT WRITE IN THIS SPACE

[REDACTED]

No Chg-P CR2E034 (11/05)

4. FEI Number 59-2971786	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

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANATION, FLORIDA 33324**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	<input type="checkbox"/>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DINER, RONALD M. 880 CARILLON PARKWAY ST. PETERSBURG, FL 33716
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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: **Ronald M. Diner, President/Director** **707-567-5800**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **7/16/08** Daytime Phone #