

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-17-2007 90044 045 *****61.25
N06000007355

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FLORIDA STATE
40004000 AMELIA ISLAND, FLORIDA



02222007 Chg-NP CR2E037 (12/06)

DOCUMENT # N06000007355			
1. Entity Name GATEWAY COMMONS II CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 303 CENTRE ST., STE. 200 FERNANDINA BEACH, FL 32034		Mailing Address 303 CENTRE ST., STE. 200 FERNANDINA BEACH, FL 32034	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 36-4590650	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent POOLE, WESLEY R. ESQ. 303 CENTRE ST., STE. 200 FERNANDINA BEACH, FL 32034		7. Name and Address of New Registered Agent Name <u>GREGORY, DAVID B.</u> Street Address (P.O. Box Number is Not Acceptable) <u>3000 FIRST COAST HIGHWAY</u> City <u>AMELIA ISLAND, FL</u> Zip Code <u>32034</u>	
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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 See Attached _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT ZEVALLOS, MEREDITH 3225 HANOVER ST. DALLAS, TX 75225 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCKAY, S. BARKSDALE 601 OCEAN CLUB CT. AMELIA ISLAND, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ZEVALLOS, PEDRO 3225 HANOVER ST. DALLAS, TX 75225 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 617, 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: [Signature] MEMBER OF BOARD (VP) 3/2/07
Signature of Director, Officer, Receiver or Trustee Date Daytime Phone #