

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2005 8:00 am
Secretary of State

07-19-2005 90037 016 ****61.25

DOCUMENT # N46641

1. Entity Name
GATEWAY GOLF & COUNTRY CLUB, INC.



Principal Place of Business
**11360 CHAMPIONSHIP DRIVE
FORT MYERS, FL 33913 US**

Mailing Address
**11360 CHAMPIONSHIP DRIVE
FORT MYERS, FL 33913 US**

50056035



2. Principal Place of Business

3. Mailing Address
c/o Christopher Shields

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1833 Hendry Street

06152005 Chg-NP .CR2E037 (10/03)

City & State

City & State
Fort Myers, FL

4. FEI Number
65-0300811

Applied For
Not Applicable

Zip

Country

Zip
33901

Country
USA

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

6. Name and Address of Current Registered Agent

**SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
FORT MYERS, FL 33901**

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. I am familiar with, and accept the obligations of registered agent.

Christopher J. Shields

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when transferring)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **HOOD, JACKIE**
STREET ADDRESS **10830 POND RIDGE DRIVE**
CITY-ST-ZIP **FORT MYERS, FL 33913**

TITLE **V** ☒ Delete
NAME **KLEIN, GERRY**
STREET ADDRESS **12050 FAIRWAY POINTE LANE**
CITY-ST-ZIP **FORT MYERS, FL 33913**

TITLE **S** ☒ Delete
NAME **LUTZ, WILLIAM**
STREET ADDRESS **12070 FAIRWAY POINT LANE**
CITY-ST-ZIP **FORT MYERS, FL 33913**

TITLE **TD** ☒ Delete
NAME **NEWLIN, JIM**
STREET ADDRESS **109990 MAHOGANY RUN**
CITY-ST-ZIP **FORT MYERS, FL 33913**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **Jerry Snyderman**
STREET ADDRESS **11970 Rosemount Drive**
CITY-ST-ZIP **Fort Myers, FL 33913**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Change ☒ Addition
NAME **Newlin, Jim**
STREET ADDRESS **10990 Mahogany Run**
CITY-ST-ZIP **Fort Myers, FL 33913**

TITLE **VPD** ☐ Change ☒ Addition
NAME **Shaw, Greg**
STREET ADDRESS **12071 Fairway Pointe Lane**
CITY-ST-ZIP **Fort Myers, FL 33913**

TITLE **SD** ☐ Change ☒ Addition
NAME **Bishop, Steve**
STREET ADDRESS **11561 Westlinks Drive**
CITY-ST-ZIP **Fort Myers, FL 33913**

TITLE **TD** ☐ Change ☒ Addition
NAME **Gerry Klein**
STREET ADDRESS **12050 Fairway Pointe Lane**
CITY-ST-ZIP **Fort Myers, FL 33913**

TITLE **D** ☐ Change ☒ Addition
NAME **Al Olds**
STREET ADDRESS **12090 Wedge Drive**
CITY-ST-ZIP **Fort Myers, FL 33913**

TITLE **D** ☐ Change ☒ Addition
NAME **Tom Crider**
STREET ADDRESS **11964 Cypress Links Drive**
CITY-ST-ZIP **Fort Myers, FL 33913**

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #