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Jun 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000001743 (0)**

1. Corporation Name

GATEWAY TO FLORIDA PROPERTIES, INC.



Principal Place of Business 10780 KAREN GALE LANE JACKSONVILLE FL 32225-2928	Mailing Address POST OFFICE BOX 56883 JACKSONVILLE FL 32241-6883
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3. Date Incorporated or Qualified 03/28/1997	4-3-98
4. FEI Number 59-3503620	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26 6347 COLLINS ROAD
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Jacksonville, Florida	City & State 28 Jacksonville, Florida
Zip 24 32244	Country 29 USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TEIGLAND, GEORGE E 10780 KAREN GALE LANE JACKSONVILLE FL 32225-2928	
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10. Name and Address of New Registered Agent 81 Name CLARENCE J. OLSEN 82 Street Address (P.O. Box Number is Not Applicable) 6347 COLLINS ROAD 83 84 City Jacksonville FL 85 Zip Code 32244	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Clarence J. Olsen* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT CLARENCE J. OLSEN 6347 COLLINS ROAD JACKSONVILLE, FL 32244-5809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT (DIRECTOR) MILO HOLY 9439 SAN JOSE BLVD #184 JACKSONVILLE, FL 32237-5547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY (DIRECTOR) HELEN OLSEN 6347 COLLINS ROAD JACKSONVILLE, FL 32244-5809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER (DIRECTOR) FREDERICK D. HOPKINS 3634 HILWARD ROAD JACKSONVILLE, FL 32217-4259
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD MEMBER (TRUSTEE) GEORGE E. TEIGLAND 10780 KAREN GALE LANE JACKSONVILLE, FL 32225-2928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD MEMBER (TRUSTEE) DONALD SUNDBY 11133 STOWE COTTAGE LANE JACKSONVILLE, FL 32223-7308

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	BOARD MEMBER (TRUSTEE) MARJORIE SUNDBY 11133 STOWE COTTAGE LANE JACKSONVILLE, FL 32223-7308
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Clarence J. Olsen* **CLARENCE J. OLSEN** **4-3-98 (AM)** **771 77-12**

CR2E037 (10/97)