

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90003 031 ****61.25

DOCUMENT # N97000001743

1. Entity Name
GATEWAY TO FLORIDA PROPERTIES, INC.



Principal Place of Business
**10760 KAREN GALE LANE
JACKSONVILLE, FL 32225-2928**

Mailing Address
**1742 LORD BYRON LANE
JACKSONVILLE, FL 32223-0800 US**

44018370



2. Principal Place of Business

3. Mailing Address
12974 Bearpaw Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03132004 Chg-NP CR2E037 (10/03)

City & State

City & State
Jacksonville, FL

4. FEI Number
59-3503620

Applied For
☐ Not Applicable

Zip

Country

Zip
32246-1062

Country
U.S.A.

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

6. Name and Address of Current Registered Agent

**YERKES, EUGENE H
1742 LORD BYRON LANE
JACKSONVILLE, FL 32223**

7. Name and Address of New Registered Agent

Name
Thomas R. Larrison
Street Address (P.O. Box Number is Not Acceptable)
12974 Bearpaw Place
City
Jacksonville FL Zip Code
32246-1062

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 *Thomas R. Larrison* **Thomas R. Larrison, President** **3/15/2004**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$81.25
Due by May 1, 2004**

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 NAME STREET ADDRESS CITY-ST-ZIP	P YERKES, EUGENE H 1742 LORD BYRON LANE JACKSONVILLE, FL 32223	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LARRISON, THOMAS 12974 BEARPAW PLACE JACKSONVILLE, FL 322461062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HILYARD, JANICE 10809 SKYLARK DRIVE JACKSONVILLE, FL 322573622	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TEIGHLAND, GEORGE 10760 KAREN GALE LANE JACKSONVILLE, FL 322252928	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LARSON, KAREN 4013 MORESBURGH COURT EAST JACKSONVILLE, FL 322578997	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEIGLAND, BEVERLY 10760 KAREN GALE LANE JACKSONVILLE, FL 322252928	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Thomas R. Larrison 12974 Bearpaw Place Jacksonville, FL 32246-1062	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Frank Morrison 4516 Hanover Park Drive Jacksonville, FL 32224-8605	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S David Brynildson 10532 Tanglewood Drive West Jacksonville, FL 32257-6441	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Kent Larson 4013 Moresburg Court East Jacksonville, FL 32257-8987	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D George Teigland 10760 Karen Gale Lane Jacksonville, FL 32225-2928	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Eugene Yerkes 1742 Lord Byron Lane Jacksonville, FL 32223-0800	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Thomas R. Larrison* **Thomas R. Larrison, President** **3/15/2004 (904) 221-6264**
Signature and typed or printed name of signing officer or director Date Daytime Phone #