

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114571

Entity Name: GATEMAN ENTERPRISES, INC.

FILED
Mar 11, 2007
Secretary of State

Current Principal Place of Business:

7400 NW 17TH ST
#302
PLANTATION, FL 33313

Current Mailing Address:

7400 NW 17TH ST
#302
PLANTATION, FL 33313

New Principal Place of Business:

5370 LAS VERDES CIRCLE
#302
DELRAY BEACH, FL 33484

New Mailing Address:

5370 LAS VERDES CIRCLE
#302
DELRAY BEACH, FL 33484

FEI Number: 65-1062652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATEMAN, ALVIN D
7400 NW 17TH ST
#302
PLANTATION, FL 33313 US

Name and Address of New Registered Agent:

GATEMAN, ALVIN D
5370 LAS VERDES CIRCLE
#302
DELRAY BEACH, FL 33484 US

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.

SIGNATURE:

03/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GATEMAN, ALVIN D
Address: 7400 NW 17TH STREET #302
City-St-Zip: PLANTATION, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GATEMAN, ALVIN D
Address: 5370 LAS VERDES CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALVIN D. GATEMAN

P

03/11/2007

Electronic Signature of Signing Officer or Director

Date