

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # P02000062004

1. Entity Name
THE GATE STORE, INC.



Principal Place of Business
321 BEYNON LANE
BUNNELL, FL 32110

Mailing Address
317 CR 330
BUNNELL, FL 32110

DO NOT WRITE IN THIS SPACE



01132008 No Chg-P CR2E034 (11/05)

4. FEI Number
03-0465187

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DAVIES, ANNA
317 BEYNON LANE
BUNNELL, FL 32110

**DO NOT WRITE
IN THIS SPACE**

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

Daniel Vera

29 FEB 2008

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME JACKSON, WALTER S
STREET ADDRESS 780 COOPER HOLLOW RD
CITY-ST-ZIP TELlico PLAINS, TN 37385

TITLE S
NAME DAVIES, ANNA
STREET ADDRESS 317 BEYNON LN
CITY-ST-ZIP BUNNELL, FL 32110

TITLE D
NAME VERA, DANIEL
STREET ADDRESS 1005 SUTTON CIRCLE
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE D
NAME ROESCH, MICHAEL
STREET ADDRESS 5 SEASIDE COURT
CITY-ST-ZIP PALM COAST, FL 32184

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000845770
03/18/08-80001-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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 607, 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:

Daniel Vera

29 FEB 2008 (386)437 4487

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #