## 2207 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P0300084304 1. Entity Name GATEWAY TO THE ARTS, INCORPORATED



FILED Aug 02, 2007 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

146 2 STREET N.

146 2 STREET N.

110

110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ST. PETERSBURG, FL 33701

ST. PETERSBURG, FL 33701



DO	NOT	WRITE	IN	<b>THIS</b>	<b>SPACE</b>
-		*****	2 1 15	2 3 KE	

07312007 No Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and	Address of	Current	Registe	red Ageni

FORTUNE, RICHARD W

146 2 STREET N.

SIGNATURE:

ST. PETERSBURG, FL 33701

## 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_ Signature, your or printed name of registered agent and title if applicable. (ROTE, Registered Agent signature required when reinstalling)  DATE							
		Election Campaign Fin     Trust Fund Contribution		\$5.00 May Be Added to Fees	in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	OFFICERS AND DIRE	CTORS					
TITLE NAME STREET ACCRESS CITY-ST-ZIP	PD FORTUNE, RICHARD W 146 2 STREET N #110 ST, PETERSBURG, FL 33701						
TITLE NAME STREET AGDRESS CITY-ST-ZIP					U00000771222 08/02/07-80003-009 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		DO	NOT WRITE		
TITLE HAME STREET ADDRESS CRY-SI-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 cath; that I am an officer or director of the corporation or the receiver or flustee 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.							