

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90009 016 ***150.00

DOCUMENT # P12692

1. Corporation Name
PACIFIC GATEWAY PROPERTIES, INC.

Principal Place of Business
930 MONTGOMERY STREET
4TH FLOOR
SAN FRANCISCO CA 94133
US

Mailing Address
930 MONTGOMERY STREET
4TH FLOOR
SAN FRANCISCO CA 94133
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1986

4. FEI Number

04-2816560

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MARINO, RAYMOND
STREET ADDRESS 930 MONTGOMERY STREET, SUITE 400
CITY-ST-ZIP SAN FRANCISCO CA 94133 ☐ DELETE

TITLE DVPS
NAME WATSON, CHRISTOPHER
STREET ADDRESS 930 MONTGOMERY STREET, SUITE 400
CITY-ST-ZIP SAN FRANCISCO CA 94133 ☒ DELETE

TITLE VPT
NAME LOPRESTI, STEPHEN
STREET ADDRESS 930 MONTGOMERY STREET, SUITE 400
CITY-ST-ZIP SAN FRANCISCO CA 94133 ☐ DELETE

TITLE CD
NAME OSBORN, RICHARD
STREET ADDRESS 930 MONTGOMERY STREET, SUITE 400
CITY-ST-ZIP SAN FRANCISCO CA 94133 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE VP/ Secretary ☒ Change ☐ Addition
3.2 NAME LoPresti, Stephen
3.3 STREET ADDRESS 930 Montgomery Street, Ste. 400
3.4 CITY-ST-ZIP San Francisco, CA 94133

4.1 TITLE CD ☒ Change ☐ Addition
4.2 NAME Osborne, Richard
4.3 STREET ADDRESS 930 Montgomery Street, Suite 400
4.4 CITY-ST-ZIP San Francisco, CA 94133

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/8/99 415 3984800

0560-09

CR05034-11/98