FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 PM 3:31
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000002386 (9)

1. Corporation Name

GATEWAY STORAGE COMPANY

Principal Place of Business: 11922 FAIRWAY LAKES DRIVE, FORT MYERS FL 33913, US

Mailing Address: 11922 FAIRWAY LAKES DRIVE, FORT MYERS FL 33913, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/11/1993
3a. Date of Last Report: 06/13/1994
4. FEI Number: 65-0381629 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business / 2a. Mailing Address: 21, 22 Suite, Apt. # etc., 23 City & State, 24 Zip, 25 Country / 26, 27 Suite, Apt. # etc., 28 City & State, 29 Zip, 30 Country

9. Name and Address of Current Registered Agent

LUMSDEN, DENNIS J
6719 WINKLER RD
SUITE 121
FT MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name: Samuel E. Dockery
82 Street Address (P.O. Box Number is Not Acceptable): 11922 Fairway Lakes Drive
83
84 City: Fort Myers FL 85 Zip Code: 33913

11. Pursuant to the provisions of sections 607.0502 and 617.0502, 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]

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	DOCKERY, SAMUEL E
STREET ADDRESS	11930 FAIRWAY LAKES DR
CITY-ST-ZIP	FT MYERS FL 33913

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0333558 CP