


2003 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATION
 03 JUN 20 PM 1:11

DOCUMENT # P95000093224

1. Entry Name
Gateway Counselling Associates, PA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4286 96th Avenue
 Suite, Apt. #, etc.

3. Mailing Address
4286 96th Avenue
 Suite, Apt. #, etc.

City & State
Pinellas Park, FL

City & State
Pinellas Park, FL

Zip
33782 Country

Zip
33782 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3343667

Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Alice Shuler

Street Address (P.O. Box Number is Not Acceptable)
4286 96th Avenue

City
Pinellas Park FL Zip Code
33782

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 _____ (NOTE: Registered Agent signature required when re-electing)

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
 Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D</u> <u>Shuler Alice</u> <u>4286 96th Avenue</u> <u>Pinellas Park, FL 33782</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PVST</u> <u>Shuler Alice</u> <u>4286 96th Avenue</u> <u>Pinellas Park, FL 33782</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Alice Shuler 5/27/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR250343 (12/02)

June 16, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Gateway Counselling Associates, Inc.
FEI: 59-3343667

Dear Sirs:

As per instructions received when I called your office today, I would appreciate a review of my case regarding the dissolution of my corporation. Enclosed you will find my UBR reports for 2002 and 2003 along with my check for \$300.

A review of my history will show that since my incorporation in 1996 I have never been late with the submission of my report. However, before the close of 2001 my partner and I split our practice. Since the split was less than amicable, my mail was never forwarded to me. I never received the 2002 UBR report and I was not aware of a problem until May of this year when I was told my corporation had been dissolved. All other business related matters have been processed just as if the corporation was intact.

I certainly appreciate your time in reviewing my case. I respectfully request a favorable review.

Sincerely,

A handwritten signature in cursive script, appearing to read "Alice Shuler".

Alice Shuler