## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## May 04, 2005 8:00 am Secretary of State DOCUMENT # P98000090991 1. Entity Name 05-04-2005 90171 018 \*\*\*158.75 CITYGATE COMMERCIAL, INC. Principal Place of Business Mailing Address 5672 STRAND COURT 5672 STRAND COURT 00031009 SUITE 1 NAPLES FL 34110 SUITE-1 NAPLES FL 34110 2. Principal Place of Business 3. Mailing Address 801 ANCHOR RODE DRIVE #106 801 ANCHOR RODE DRIVE #106 NÄPLES. FL 34103 1st MOORE CR2E034 (10/04) NAPLES, FL 34103 4. FEI Number Applied For 59-3554973 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JANET KELLY, JANET 5672 STRAND COURT STANCHOR RODE DRIVE #106 SUITE #1 NAPLES, FL 34103 NAPLES FL 34110 Zip Code FL 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, P. Kelly SIGNATURE FILE NOW!!!-FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Change PD THILE HARDY, ROBERTS. 5659 Strand Court # 101 ☐ Addition TITLE Delete HARDY, ROBERT NAME 5672 STRAND COURT #1 STREET ADDRESS STREET ADDRESS NAPLES FZ 34110 CITY-ST-ZIP NAPLES FL 34110 CITY-ST-ZIP Delete ST TITLE ☐ Addition TITLE 80 ANCHOR RODE DRIVE #106 NAME KELLY, JANET NAME 5672 STRAND COURT STE 1 STREET ADDRESS STREET ADDRESS NAPLES, FL 34103 CITY-ST-ZIP NAPLES FL 34110 CITY-ST-ZIP TITLE VPD Delete TITLE Strand HAROY NAME HARDY, PAUL NAME Court # 101 STREET ADDRESS 5672 STRAND COURT 31 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34110 ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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.

FILED