## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000005042

Entity Name: GATEKEEPER BUSINESS SOLUTIONS, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1166 WES <sup>-</sup> SUITE 310	NEWPORT (	CENTER DR				
DEERFIELI	D BEACH, FL	33442				
Current Mailing Address:			New Maili	New Mailing Address:		
1166 WES	Γ NEWPORT (	CENTER DR				
SUITE 310 DEERFIELI	D BEACH, FL	33442				
FEI Number:			Number Not Appl	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
PATTERSO	ON, MICHAEL					
	ΓNEWPORT (	CENTER DR				
	D BEACH, FL	33442 US				
The above in the State		submits this statement for the purpos	e of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	E:					
	Electron	ic Signature of Registered Agent			Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:		Delete	Title:	(	) Change ( ) Addition	
Name:	ARON, RICHAR 30 WINDERME		Name:			
Address: City-St-Zip:	STAMFORD, CT		Address: City-St-Zip:			
Title:	D ()	Delete	Title:	(	) Change ( ) Addition	
Name:	ENDELSON, KE		Name:			
Address:	7027 VALENCIA		Address:			
City-St-Zip:	BOCA RATON,	-L 33433	City-St-Zip:			
Title:	D ()	Delete	Title:	(	) Change ( ) Addition	
Name:	GOLDSTEIN, D	ONALD	Name:	•		
Address:	3115 S. OCEAN		Address:			
City-St-Zip:	HIGHLAND BEA	CH, FL 33487	City-St-Zip:			
Title:	D ()	Delete	Title:	(	) Change ( ) Addition	
Name:	LEWIN, GERAL	D	Name:			
Address:	7050 AYRSHIRI		Address:			
City-St-Zip:	BOCA RATON,	FL 33496	City-St-Zip:			
Title:	C ()	Delete	Title:	SECR ()	() Change()Addition	
Name:	MEYERSON, M	ONROE	Name:	PATTERSON,	MIKE	
Address:	7172 MANDARII		Address:	22332 COLLIN		
City-St-Zip:	BOCA RATON, I	-L 33432	City-St-Zip:	BOCA RATON	, FL 33428	
Title:	PRES (X)	Delete	Title:	(	) Change ( ) Addition	
Name:	CASH, MICHÀÉ		Name:	,		
Address:	511 N MILTON I	OR	Address:			
City-St-Zip:	NIXA, MO 6571	4	City-St-Zip:			

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE PATTERSON SECR 04/16/2009

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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