

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

04700

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

**FILED**  
**Jun 01, 1999 8:00 am**  
**Secretary of State**

06-01-1999 90038 009 \*\*\*150.00

DOCUMENT # V00700

1. Corporation Name  
GATEWAY P-2, INC.

Principal Place of Business  
760 BOARDWAY  
LONGBOAT KEY FL 34228

Mailing Address  
760 BOARDWAY  
LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/17/1991

4. FEI Number  
65-0302814

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 1235 Jefferson Dr

Suite, Apt. #, etc.

City & State

23 Lakeland FL

Zip Country

24 33803

25

2a. Mailing Address

26 1235 Jefferson Dr

Suite, Apt. #, etc.

City & State

28 Lakeland FL

Zip Country

29 33803

30

9. Name and Address of Current Registered Agent

EASTERLING, NICK  
760 BROADWAY  
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name Raymond Phillips  
82 Street Address (P.O. Box Number is Not Acceptable)  
1235 Jefferson Dr  
83  
84 City Lakeland FL 85 Zip Code 33803

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 Raymond Phillips

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

(NOTE: Registered Agent signature required when reinstating)

2/25/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME EASTERLING, NICK  
STREET ADDRESS 760 BROADWAY  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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 President ☒ Change ☐ Addition  
1.2 NAME Oscar R Linder  
1.3 STREET ADDRESS P.O. Box 1505  
1.4 CITY-ST-ZIP Boca Grande, FL 33921

2.1 TITLE Vice President ☒ Change ☐ Addition  
2.2 NAME Raymond Phillips  
2.3 STREET ADDRESS 1235 Jefferson Dr  
2.4 CITY-ST-ZIP Lakeland, Florida 33803

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE Sec/Treas ☐ Change ☐ Addition  
4.2 NAME Betty Linder Phillips  
4.3 STREET ADDRESS 1235 Jefferson Dr  
4.4 CITY-ST-ZIP Lakeland FL 33803

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:

Raymond Phillips

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/99 813 754-2727

DATE

Daytime Phone #

CR2E034 (1/98)