

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90141 041 ***150.00

DOCUMENT # **814362**

1. Corporation Name

WALLY FINDLAY GALLERIES, (FLORIDA), INC.

Principal Place of Business

**WALLY FINDLAY GALLERIES
165 WORTH AVENUE
PALM BEACH FL 33480
US**

Mailing Address

**WALLY FINDLAY GALLERIES
165 WORTH AVENUE
PALM BEACH FL 33480
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/23/1960

4. FEI Number

59-0903602

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

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VSTD** ☒ DELETE

NAME **PETERSON, GERALD W.**
STREET ADDRESS **188 EAST WALTON PLACE**
CITY-ST-ZIP **CHICAGO IL**

TITLE **D** ☒ DELETE

NAME **ARCOS, MANUEL**
STREET ADDRESS **14 E. 60TH STREET**
CITY-ST-ZIP **NEW YORK NY**

TITLE **D** ☒ DELETE

NAME **COOPER, JAMES**
STREET ADDRESS **165 WORTH AVENUE**
CITY-ST-ZIP **PALM BEACH FL**

TITLE **PD** ☒ DELETE

NAME **RYAN, ROBERT W.**
STREET ADDRESS **188 EAST WALTON PLACE**
CITY-ST-ZIP **CHICAGO IL**

TITLE **D** ☒ DELETE

NAME **STROMER, ERVIN**
STREET ADDRESS **188 EAST WALTON PLACE**
CITY-ST-ZIP **CHICAGO IL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/D** ☒ Change ☐ Addition

1.2 NAME **James R. Borynack**
1.3 STREET ADDRESS **165 Worth Avenue**
1.4 CITY-ST-ZIP **Palm Beach, Fla. 33480**

2.1 TITLE **V/D** ☒ Change ☐ Addition

2.2 NAME **William Borynack**
2.3 STREET ADDRESS **165 Worth Avenue**
2.4 CITY-ST-ZIP **Palm Beach, Fla. 33480**

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **Donna Nallett**
3.3 STREET ADDRESS **165 Worth Avenue**
3.4 CITY-ST-ZIP **Palm Beach, Fla. 33480**

4.1 TITLE **S** ☒ Change ☐ Addition

4.2 NAME **Norman L. Faber, Esq.**
4.3 STREET ADDRESS **14 East 60th Street**
4.4 CITY-ST-ZIP **New York, N.Y. 10022**

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:

James R. Borynack
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 8, 99
Date

561-655-2090
Daytime Phone #

CR2E034 (11/98)