## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009968

FILED Apr 29, 2009 Secretary of State

Entity Name: GALLERIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	VE STREET ST, FL 33040			
current Mailing Address:		New Mailing Address:		
TE 6	RSEAS HWY			
il Number	: 65-0477088	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
300 OVE	, MARLENE C RSEAS HWY S DN, FL 33050	STE 6 US		
		submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
the Stat	e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	e of Florida. RE:	submits this statement for the particles in the particle in the particles in the particle in the particles in the particles in the particles in the particles in the particle in the particles in the particle in the pa		ed office or registered agent, or both,  Date
the Stat	e of Florida. RE:	ic Signature of Registered Ago	ent	
the Stat	e of Florida.  RE: Electron  S AND DIREC	ic Signature of Registered Ago TORS: Delete	ent	Date
the State GNATU  FFICER  le: me: dress:	e of Florida.  RE: Electron  S AND DIREC  P () EPLER, BREND 1016 HOWE ST KEY WEST, FL	ic Signature of Registered Ago TORS:  Delete DA  33040  Delete	ent  ADDITIONS/CHANG  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTO
the Stat GNATU  FFICER e: me: dress: y-St-Zip: e: me: dress:	e of Florida.  RE: Electron  S AND DIREC  P () EPLER, BREND 1016 HOWE ST KEY WEST, FL  VP () BIRRELL, LISA 1016 HOWE ST KEY WEST, FL	ic Signature of Registered Age  TORS:  Delete  33040  Delete  33040  Delete	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARLENE C. MORATO T 04/29/2009