

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 814362

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** WALLY FINDLAY GALLERIES, (FLORIDA), INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-0903602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BORYNACK, JAMES R  
Address: 165 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: VD  
Name: BORYNACK, WILLIAM C  
Address: 165 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: BORYNACK, DONNA  
Address: 165 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: ZARALEGUI, ADOLFO  
Address: 165 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: VP  
Name: CLARK, STEPHANIE B  
Address: 165 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480 US

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

SIGNATURE: ADOLFO ZARALEGUI

VP

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date