

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90129 020 ***150.00

DOCUMENT # 846247

1. Corporation Name
S.R. GALLERY, INC.



Principal Place of Business
**ROUTE 1
FRANKLIN CENTER PA 19091**

Mailing Address
**ROUTE 1 % TAX DEPT
FRANKLIN CENTER PA 19091
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1980

4. FEI Number

23-2096809

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

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	D	<input type="checkbox"/> DELETE
NAME	RESNICK, STEWART	
STREET ADDRESS	9481 SUNSET BLVD.	
CITY-ST-ZIP	BEVERLY HILLS CA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RESNICK, LYNDA	
STREET ADDRESS	9481 SUNSET BLVD.	
CITY-ST-ZIP	BEVERLY HILLS CA	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	KRADJEL, RICHARD J.	
STREET ADDRESS	217 SHAWNEE ROAD	
CITY-ST-ZIP	ARDMORE PA	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	LUCKER, HOWARD P	
STREET ADDRESS	205 STANDISH LANE	
CITY-ST-ZIP	MERION PA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MORTON, JOHN	
STREET ADDRESS	101 MOUGINS CIRCLE	
CITY-ST-ZIP	KENNETT SQUARE PA 19348	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	BERGER, ADAM	
STREET ADDRESS	765 NEWTOWN RD	
CITY-ST-ZIP	VILLANOVA PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	P Bruce Newman
6.3 STREET ADDRESS	45 Route 1
6.4 CITY-ST-ZIP	Franklin Center PA 19091

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99

Date

610-459-6988

Daytime Phone #

CR2E034 (11/98)