## 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** 

## DOCUMENT # 846247

1. Corporation Name

S.R. GALLERY, INC.

21	ROUTE 1 % TAX DEPT FRANKLIN CENTER PA 19091 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 06/16/1980  4. FEI Number 23-2096809 Applied For Not Applicable  #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required  te City & State 28 Country Zip Country Zip Country Zip Personal Property Tax. Since Added to Fees  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  Street Address (P.O. Box Number is Not Acceptable)  NTATION FL 33324  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 receivable receivable and of directors. I hereby accept the appointment as registered receivable receivable as registered and of directors. I hereby accept the appointment as registered
ROUTE 1 * TAX DEPT FRANKLIN CENTER PA 19091    ROUTE 1 * TAX DEPT FRANKLIN CENTER PA 19091   DO NOT WRITE IN THIS SPACE	ROUTE 1 % TAX DEPT FRANKLIN CENTER PA 19091 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 06/16/1980  4. FEI Number 23-2096809 Applied For Not Applicable  #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required  te City & State 28 Country Zip Country Zip Country Zip Personal Property Tax. Since Added to Fees  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  Street Address (P.O. Box Number is Not Acceptable)  NTATION FL 33324  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 receivable receivable and of directors. I hereby accept the appointment as registered receivable receivable as registered and of directors. I hereby accept the appointment as registered
FRANKLIN CENTER PA 19091  John Control	TER PA 19091  FRANKLIN CENTER PA 19091  US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  06/16/1980  4. FEI Number  23-2096809  #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Suite, Apt. #, etc.  Country  Zip  Country  Sip  Country  Sip  Country  Sip  Country  Sip  Country  Sip  Country  Sip  Country  Sig  Romand Address of Current Registered Agent  10. Name and Address of New Registered Agent  CORPORATION SYSTEM  Sig  Sig  Sig  Sig  No  Sig  Sig  Sig  Sig  Sig  Sig  Sig  Si
3. Date Incorporated or Qualifed 06/16/1980  2. Principal Place of Business  2a. Mailling Address  2b. Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  City & State  28  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Suite, Apt. #, etc.  S. Certificate of Status Desired  Fee Required  Trust Fund Contribution  Added to F  Personal Property Tax.  System Address of Current Registered Agent  CT CORPORATION SYSTEM  1200 S. PINE ISLAND ROAD  PLANTATION FL 33324  82  Street Address (P.O. Box Number is Not Acceptable)  PLANTATION FL 33324  83  City  Street Address of Directors Directors of Sections 607.0502 and 607.1508, Florida Statutes, the abover-named corporation submits this statement for the purpose of changing its 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  NAME  RESNICK, STEWART  STREET ADDRESS  9481 SUNSET BLVD.  1.3 STREET ADDRESS  9481 SUNSET BLVD.  1.3 STREET ADDRESS  1.4 CITY-ST-ZP  Phone	3. Date Incorporated or Qualifed 06/16/1980    Jace of Business   Za. Mailing Address   A. FEI Number   Applied For
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied	Country   Zip   Country   Surface   Agent   Country   Agent
2. Principal Place of Business 2. Mailing Address 25	Applied For   Applied For   Applied For   Ref.   Suite, Apt. #, etc.   Suite, Apt. #,
23-2096809   Not Ag Suite, Apt. #, etc.   Suite, Apt. #, etc.   22	#, etc.   Suite, Apt. #, etc.   Status Desired   \$8.75 Additional Fee Required    Tee   City & State   Status Financing   St.00 May Be Added to Fees    Country   Zip   Country   St. This corporation owes the current year Intangible Personal Property Tax.   Yes   No    9. Name and Address of Current Registered Agent   St. Name    CORPORATION SYSTEM   St. Pinancing   St.00 May Be Added to Fees    10. Name and Address of New Registered Agent   St. Pinancing   St.
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Status   Statu	#, etc.   Suite, Apt. #, etc.   27   5. Certifcate of Status Desired   \$8.75 Additional Fee Required    te
See Required   See	5. Certificate of Status Desired Fee Required  Tee City & State Country Fee Required  Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  CORPORATION SYSTEM S. PINE ISLAND ROAD  NTATION FL 33324  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 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
City & State 23  Zip Country Zip Country Zip Country 24 Z5 Z9 30  Personal Property Tax.   Yes	Country Zip Country Zip Country Zip Country Zip Country S. This corporation owes the current year Intangible Personal Property Tax.  Yes No  9. Name and Address of Current Registered Agent  Street Address (P.O. Box Number is Not Acceptable)  NTATION FL 33324  To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered registered  6. Election Campaign Financing Added to Fees  8. This corporation owes the current year Intangible Personal Property Tax.  Yes No  Street Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)
Zip   Country   Zip   Country   Zip   Country   Zip   Country   Stip   C	Trust Fund Contribution Added to Fees  Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  CORPORATION SYSTEM  O. S. PINE ISLAND ROAD  NTATION FL 33324  84 City  FL 85 Zip Code  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 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
Zip Country Zip Country Zip Country S. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent S. Name S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is	Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi
25   29   30   Personal Property Tax.   Yes    9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent    CT CORPORATION SYSTEM   1200 S. PINE ISLAND ROAD   200	9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Addres
9. Name and Address of Current Registered Agent  CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324  83  14. 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 regorifice 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  D RESNICK, STEWART 12. PAME  STREET ADDRESS  GTY-ST-ZIP  Change  Change  Change  Change  Change	9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Name  84 City  FL  85 Zip Code  15 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 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
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 85 Zip Cod  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 reg 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE D DELETE 1.1 TITLE Change  CRESNICK, STEWART 9481 SUNSET BLVD. 1.3 STREET ADDRESS GRY-ST-ZIP  Change	CORPORATION SYSTEM D. S. PINE ISLAND ROAD NTATION FL 33324  82 Street Address (P.O. Box Number is Not Acceptable)  83
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agent. I am familiar with, and accept the obligations of, Section 607.0505, Floridal Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  12. OFFICERS AND DIRECTORS  TITLE  D  RESNICK, STEWART  STREET ADDRESS  9481 SUNSET BLVD.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  9481 SUNSET BLVD.  1.3 STREET ADDRESS  CITY-ST-ZIP  BEVERLY HILLS CA	registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby advect the appointment as vegetation
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TITLE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
NAME RESNICK, STEWART 1.2 NAME STREET ADDRESS 9481 SUNSET BLVD. 1.3 STREET ADDRESS CITY-ST-ZIP BEVERLY HILLS CA 1.4 CITY-ST-ZIP	Change Addition
STREET ADDRESS 9481 SUNSET BLVD. 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP BEVERLY HILLS CA 1.4 CITY-ST-ZIP	U Societies transce
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NAME RESNICK, LYNDA 22 NAME	Action, Emeri
STREET ADDRESS 9481 SUNSET BLVD. 2.3 STREET ADDRESS	
CITY-ST-ZIP BEVERLY HILLS CA 2.4 CITY-ST-ZIP Change	
VS VS	LANCE AND ADDRESS OF THE PROPERTY OF THE PROPE
	KRADJEL, RICHARD J. 32 NAME
	KRADJEL, RICHARD J. 217 SHAWNEE ROAD 32 NAME 33 STREET ADDRESS
CITY-ST-ZIP ARDMORE PA 3.4. CITY-ST-ZIP	KRADJEL, RICHARD J.  217 SHAWNEE ROAD  ARDMORE PA  32 NAME  3.3 STREET ADDRESS  34. CITY-ST-ZIP
CITY-ST-ZIP         ARDMORE PA         3.4. CITY-ST-ZIP           TITLE         VS         □ DELETE         4.1 TITLE         □ Change	KRADJEL, RICHARD J.       32 NAME         217 SHAWNEE ROAD       3.3 STREET ADDRESS         ARDMORE PA       3.4 CITY-ST-ZIP         VS       DELETE       4.1 TITLE       Change       Addition
CITY-ST-ZIP         ARDMORE PA         3.4.CITY-ST-ZIP           TITLE         VS         DELETÉ         4.1 TITLE           NAME         LUCKER, HOWARD P         4.2 NAME	KRADJEL, RICHARD J.   32 NAME     3.3 STREET ADDRESS     ARDMORE PA   3.4 CITY-ST-ZIP   Change   Addition   LUCKER, HOWARD P   4.2 NAME   Addition   Add
CITY-ST-ZIP ARDMORE PA 3.4. CITY-ST-ZIP  TITLE VS DELETE 4.1 TITLE  LUCKER, HOWARD P 4.2 NAME  STREET ADDRESS 205 STANDISH LANE 4.3 STREET ADDRESS	KRADJEL, RICHARD J.   32 NAME     217 SHAWNEE ROAD   3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     Change   Addition   Addition   LUCKER, HOWARD P   4.2 NAME   4.3 STREET ADDRESS     4
CITY-ST-ZIP	RECHARD J.   32 NAME     217 SHAWNEE ROAD   3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     Change   Addition   A
CITY-ST-ZIP	KRADJEL, RICHARD J.   32 NAME     217 SHAWNEE ROAD   3.3 STREET ADDRESS     ARDMORE PA   3.4 CITY-ST-ZIP     Change   Addition   A
CITY-ST-ZIP	KRADJEL, RICHARD J.   32 NAME     217 SHAWNEE ROAD   3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     Change   Addition   ACITY-ST-ZIP     Change   Addition   ACITY-ST-ZIP     Change   Addition   ACITY-ST-ZIP     Change   Addition   ACITY-ST-ZIP     Change   Addition   ACITY-ST-ZIP   Change   Addition   Addition   ACITY-ST-ZIP   Change   Addition   ACITY-ST-ZIP   Change   Addition   Addition   ACITY-ST-ZIP   Change   Cha
CITY-ST-ZIP	RECHARD J.   32 NAME     217 SHAWNEE ROAD   3.3 STREET ADDRESS     3.4 CITY-ST-ZIP
CITY-ST-ZIP	STANDIEL, RICHARD J.   32 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP
CITY-ST-ZIP	STANDIEL, RICHARD J.   32 NAME   3.3 STREET ADDRESS   3.4 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:

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

04-15-1999 90129 020 \*\*\*150.00