

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G43571

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: MARILYN'S GIFT GALLERY, INC.

## Current Principal Place of Business:

115 RUBY RED LANE  
LONGWOOD, FL 32750

## New Principal Place of Business:

## Current Mailing Address:

8678 H SW 95TH ST  
H  
OCALA, FL 34481

## New Mailing Address:

FEI Number: 59-2297407      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILENSKY, MARILYN  
8678 H SW 95TH ST  
OCALA, FL 34481      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: WILENSKY, MARILYN,  
Address: 8678 H SW 95TH STREET  
City-St-Zip: OCALA, FL 34481

Title: V ( ) Delete  
Name: WILENSKY, MICHAEL,  
Address: 115 RUBY RED LANE  
City-St-Zip: LONGWOOD, FL

Title: S ( ) Delete  
Name: WILENSKY, ELLIS,  
Address: 8678 H SW 95TH STREET  
City-St-Zip: OCALA, FL 33481

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: WILENSKY, MARILYN,  
Address: 8678 H SW 95TH STREET  
City-St-Zip: OCALA, FL 34481 US

Title: V (X) Change ( ) Addition  
Name: WILENSKY, MICHAEL,  
Address: 115 RUBY RED LANE  
City-St-Zip: LONGWOOD, FL 32750 US

Title: S (X) Change ( ) Addition  
Name: WILENSKY, ELLIS,  
Address: 8678 H SW 95TH STREET  
City-St-Zip: OCALA, FL 33481 US

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

SIGNATURE: MARILYN WILENSKY

P

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date