## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jun 19, 2008 8:00 am Secretary of State

06-19-2008 90001 002 \*\*\*\*61.25

DOCU	JM	IFNT	# N	105294
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1. Entity Name
THE GALLERY AT WINTER PARK, INC.



Principal Place of Busines	s
221 WALTON HEATH DR	IVE
ORLANDO, FL 32828	US

Mailing Address

P.O. BOX 4656 WINTER PARK, FL 32793 US

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		ess - No P.O. Box #	3. Mailing Address							
2180 WEST SR 434			2180 WEST SR 434		ļ					
		Suite, Apt. #, etc. SUITE 5000	Suite, Apt. #, etc.		06052008	Chg-NP	CR2E	(12/06)		
City & State		City & State			4. FEI Numbe	er		Ar	plied For	
LÓNGWOOD, FL L			LÓNGWOOD, FL		59-292	6745			t Applicable	
<sup>Zip</sup> 32779	Zio 32779 Country Zio 32779		Count	ry		of Status Desir		\$8.75 Add Fee Require	litional d	
	6. Name	and Address of Current I	Registered Agent			7. Name and	Address of N	ew Registere	d Agent	
PALMER, BETH				Name JAMES W. HART, JR.						
221 WALTON HEATH DRIVE					Street Address (	P.O. Box Number RY MANA	er is Not Accep	table)		
ORLANDO	), FL 3279	93		· · ·		WEST S			5000	
					City	WOOD	· · ·	F	7: 0.2	 7 9
8 The above	named entits	submits this statement for	the purpose of changing its	registered			th in the State	<u> </u>		
	ions of regist		the purpose of changing its t	cgistorea	Office of Togrator	rea agom, or bo	,o ,b.ca.co	4		und docopt
		4						/	-/-0	
SIGNATURE .								6/11	100	
	Signatura typed	or printed name of registered agent a	nd life if applicable. (NOTE:	Registered A	igent signature require:	d when reinstaling)		/ DAT	Ē	
	Filing Fe	a is \$81 25	9. Election Cam	paign Fin	ancina	\$5.00 May B		Make che	eck payable t	0
Filing Fee is \$61.25 Due by September 12, 2008			Trust Fund Contribution.				Florida Dep	artment of S	tate	
l 10.		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CH	ANGES TO OF	FICERS AND	DIRECTORS IN	10
10.	PD	OFFICERS AND DIR	ECTORS Delete	11.	PD	ADDITIONS/CH	ANGES TO OF	FICERS AND	DIRECTORS IN	10 Addition
	PD FENTON,	<del> </del>		-	PD	ADDITIONS/CH		FICERS AND		
TITLE	FENTON,	<del> </del>		TITLE NAME	PD SMI		A.			
TITLE NAME	FENTON, 601 GALL	KATHY		TITLE NAME	PD SMI ADDRESS 242	TH, BARBARA	A VIEW DR #2			★ Addition
TITLE NAME STREET ADDRESS	FENTON, 601 GALL	KATHY ERY DRIVE #6		TITLE NAME STREET	PD SMI ADDRESS 242	TH, BARBARA 7 GALLERY V	A VIEW DR #2			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FENTON, 601 GALL WINTER I	KATHY ERY DRIVE #6	🔀 Delete	TITLE NAME STREET CITY-S TITLE NAME	ADDRESS 242 I-ZIP WIN VPI DAI	TH, BARBARA 7 GALLERY V	A VIEW DR #2 FL 32792		☐ Change	★ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	FENTON, 601 GALL WINTER I VD CHANATE 609 GALL	KATHY ERY DRIVE #6 PARK, FL 32792 RY, GEORGE ERY DRIVE, #4	🔀 Delete	TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 242 I-ZIP WIN VPI DAI ADDRESS 609	TH, BARBARA 7 GALLERY VITER PARK, I	A VIEW DR #2 FL 32792 CHARLES		☐ Change	★ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

FULMER, MARTHA

601 GALLERY DR #3

WINTER PARK, FL 32792

SIGNATURE:

TITLE

NAME

STREET ADDRESS CHTY-ST-ZIP

Delete

6/11/08

Change

X Addition