

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90023 016 ****61.25

DOCUMENT # N16926 1. Entity Name GALLERY PLAZA, INC.					
Principal Place of Business 3502 ACCESS RD UNIT 10 ENGLEWOOD, FL 34224 US			Mailing Address 3502 ACCESS RD UNIT 10 ENGLEWOOD, FL 34224 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2727227	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOGER, STEVE 3502 ACCESS RD N. UNIT 10 ENGLEWOOD, FL 34224				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>STEVEN A. BOGER</u> <u>St. A. Boger</u> <u>1-26-05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATTULL, JAMES 3502 N. ACCESS RD., #6 ENGLEWOOD, FL 34224	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mattull, James 3502 N Access Rd #6 Englewood, FL 34224	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GASIOR, ANDREW 3502 N ACCESS RD #5 ENGLEWOOD, FL 34224	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Cindy Wickes 3502 N Access Rd #7 Englewood, FL 34224	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTULL, SUE 3502 N. ACCESS RD, #6 ENGLEWOOD, FL 34224	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steve Boger 3502 N-Access Road #10 Englewood FL 34224	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GASIOR, MARIA 3502 ACCESS ROAD, NORTH ENGLEWOOD, FL 34224	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rita Bertler D #18 3502 N Access Road Englewood, FL 34224	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BERTLER, RICHARD T 3502 N ACCESS RD ENGLEWOOD, FL 34224	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jeff Mazur 3502 N Access Rd #8 Englewood, FL 34224	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S John Mannion #11 3502 N Access Road Englewood, FL 34224	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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.					
SIGNATURE: <u>Rita Bertler</u> <u>Rita Bertler</u> <u>1/26/05</u> <u>941-475-7006</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					